Communities CX of Excellence
in Tobacco Control

Module 2

Conducting a Communities of
Excellence Needs Assessment

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in Tobacco Control

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Conducting a Communities
of Excellence Needs Assessment

California Department of Health Services, Tobacco Control Section

The Communities of Excellence consists of four modules:

Module 1: Introduction to Communities of Excellence

Module 2: Conducting a Communities of Excellence Needs Assessment

Module 3: Priority Populations Speak about Tobacco Control

Module 4: Developing a Tobacco Control Intervention and Evaluation Plan

Module 2 Content

Section 1: Community Partners – Your Traveling Companions

Key Points

- Involve partners beyond agency staff in the CX needs assessment process and in subsequent tobacco control planning to ensure that the project reflects the priorities of the community and to create community buy-in.
- Relationships with members of the community are some of a local tobacco control program's greatest resources.
- Community gatekeepers provide valuable insight and information to tobacco control groups by educating them on how to frame tobacco control issues and by helping to identify potential partners who may be willing to work on tobacco control issues.
- Recruit tobacco control partners from a systematic identification of the community's stakeholders.

CX: an Adventure in Travel

The CX needs assessment process, developing the tobacco control plan, implementing the plan, and evaluating it are activities similar to researching and planning a major trip. The CX needs assessment is the pre-trip research you conduct about several possible destinations, while the tobacco control plan is the detailed itinerary that tells you which hotels you will stay in, which sites you will see, etc. The evaluation is about documenting the trip so you can share your experiences with others and to help you have an even better trip the next time. The budget provides the resources to make the trip possible and will determine whether you stay in youth hostels or four star hotels.

Traveling Companions

Anyone who has taken a major trip knows it is best to engage your traveling companions in the planning process to get their buy-in, set expectations, and manage the budget. Traveling companions who have familiarity with the destination, language spoken, and customs of the destination can improve a trip by providing great insights into must-see sites and can decrease the stress of communicating in a country where you do not speak the language or know what the appropriate dress standards are.

Engaging community partners in the CX needs assessment and tobacco control planning process is like finding traveling companions who share similar interests and who will make your trip easier and more enjoyable because they bring unique skills or insights into the travel destination. Community partners can help you navigate a successful trip that results in improving the community's health.

Benefits of Involving Community Partners in Tobacco Control Efforts

Most tobacco-related issues, such as drifting smoke in multi-unit housing, secondhand smoke exposure in American Indian casinos, point-of-sale tobacco advertising, tobacco industry event sponsorship, and tobacco sales by pharmacies, are complex problems that are not easily solved. A variety of perspectives, knowledge, expertise, and resources are needed to effectively problem-solve and improve the health of communities regarding these and other complex public health issues.

CX is based upon the idea that community involvement is essential to conduct a tobacco control needs assessment and to create a tobacco

control plan that reflects the community's perspective and priorities. While it is time-intensive to seek out and engage a broad array of people and organizations in planning, implementing, and evaluating tobacco control activities, doing so strengthens the program through the creation of commitment, creative problem-solving, linkages to a wider circle of people and community sectors, and credibility for tobacco control activities. These relationships with community members and diverse community sectors are some of a tobacco control program's greatest resources.

Benefits to a participatory collaborative needs assessment and planning process include the following:
- Ties the program to the community since members were involved in developing it and helping it to be successful
- Brings together a variety of expertise, influence, and connections that may generate breakthroughs in problem-solving and facilitate implementation of the plan
- Helps gain access to gatekeepers and community leaders
- Helps bridge language and cultural differences in order to communicate tobacco control messages in a manner likely to be understood by diverse audiences
- Increases the likelihood that targeted community members and sectors will come into contact with your messages and that the messages will be well received
- Mobilizes and empowers the community through involvement and decision-making

Engaging Community Partners: Think Systematically and Develop a Recruitment Plan

Engaging community members in the CX needs assessment, priority setting, and planning process should be more than an exercise in obtaining buy-in for your agency's predetermined priorities. Rather, it is about engaging community members in a process to look at a wide variety of tobacco-related issues impacting the community, to dialogue about the picture painted by the data for each tobacco-related issue assessed, to set priorities and then to engage in creative problem-solving and planning to address high priorities.

To ensure that you engage a broad array of people and organizations in collaborative planning, it is recommended that you develop a plan to recruit new partners. A recruitment plan will help you to systematically identify and develop relationships with groups and individuals who may be able to help with your tobacco control efforts either because of their connection to target populations or because they are involved in a community sector that you are trying to influence, such as enforcement or multi-unit housing. Remember, relationship building takes time, evolves over time, and is ongoing. Your program's credibility will be enhanced if groups perceive that their input is solicited before the plan is developed and that there are opportunities to remain active throughout implementation.

Seek to develop a recruitment plan that is flexible. Becoming a partner should not necessarily require that the same groups or individuals commit to months or years of participation. Some partners will commit long-term, and other partners may participate in one-time, single-issue activities. Some will commit through participation in meetings, others through providing advice by phone or through email, or by writing letters. Periodically revisit the recruitment plan and modify it as necessary. See the Supplemental Materials at the end of this section for a *Plan to Recruit Partners* tool that will help guide your efforts to identify and conduct outreach to new partners.

Find Opportunities to Link Tobacco Control to Other Issues

Tobacco control advocates should seek to develop effective partnerships with groups working to address other community and public health priorities. Poverty, youth violence, limited affordable

Community partnerships, particularly when they reach out to nontraditional partners, can be among the most effective tools for improving health in communities.

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housing, and lack of access to quality education, jobs, food, and social services are some of the priority issues faced by many communities. These issues interact in complex ways, promoting and reinforcing one another; many of them are correlated with increased tobacco use. Table 1 provides some examples of linkages between tobacco control and other health and social issues.

Table 1	
Examples of Linkages between Tobacco Control and Other Priority Issues[1]	
Community Priority	**Link to tobacco control**
Youth violence prevention	Youth employment and resiliency programs increase young people's abilities to make healthy decisions, including the choice not to use tobacco.
Quality housing	Tenants seeking to improve the quality of their living environments and property owners seeking lower maintenance and liability costs may support clean indoor-air policies.
Family support services for those of low income	Family support services work to protect limited family budgets by reducing the purchase of drugs (including tobacco) and alcohol and increasing income by reducing sick days.
Parks and recreation	Safe, clean parks that promote healthy activities and are free of tobacco-related litter improve a community's livability.
Literacy	Literacy helps individuals build skills to understand and protect themselves and others from the harmful effects of tobacco.
Asthma	Childhood and adult onset asthma are linked to secondhand smoke exposure. Constituency groups addressing asthma may support secondhand smoke educational efforts and the establishment of smoke-free multi-unit housing policies.
Cervical and breast cancer prevention	Smoking is a risk factor for developing cervical cancer, and breast cancer is linked to secondhand smoke exposure among pre-menopausal women. Constituency groups addressing these women's health issues may promote cessation services and secondhand smoke policy efforts.
Prenatal care and childcare service providers	Smoking during pregnancy increases the risk for pre-term birth and low birth weight babies. After a baby is born, exposure to secondhand smoke increases risk for Sudden Infant Death Syndrome and the development of respiratory illnesses and asthma in children. Providers serving pregnant women and families may promote cessation and secondhand smoke prevention education as well as support efforts to improve secondhand smoke protection in single family homes, multi-unit housing, and cars.

1 Tobacco Technical Assistance Consortium. 2004. Communities of Excellence Plus in Tobacco Control: Training & Resource Manual. Atlanta, Georgia.

Find Potential Partners

One useful approach to reaching out to new partners is to identify a community's gatekeepers. Gatekeepers are the groups or individuals that are knowledgeable, credible, and well-connected within the population, such as members of the faith community, business owners, community workers, or parent advocates. It is often helpful to begin by making contact with partners, organizations, and individuals who are already familiar with your project or agency to identify gatekeepers. Describe your project's goals, and ask for assistance in identifying others who can help with your goals in the community.

Identify prospective partners in the community by systematically compiling a list of stakeholders. Stakeholders are those community members, organizations, agencies, and sectors who may affect or be affected by the tobacco control issue of interest (e.g., tobacco retail licensing, smoke-free multi-unit housing, tobacco industry sponsorship of a local rodeo, the provision of smoking cessation services, etc.). Stakeholders include those who can help advance or block action, as well as those who control resources, implement solutions, influence others, provide information, or are involved in community life in other ways. Use all of your project's available assets and connections, including coalition members and your own staff's relationships. Think broadly and consider parent groups, youth groups, health-related groups, senior groups, elected and appointed officials, philanthropic organizations, business and property owners, the tourist industry, environmental groups, schools, faith leaders, nonprofit/community-based organizations, housing associations, and others.

Challenges and Opportunities of Collaboration

Collaboration with those who share a common goal is a valuable approach to addressing many community priorities, including tobacco control. However, it takes a significant investment of time and commitment to make it work. Often, "trust and turf" issues arise: people are afraid that if they pool resources, they will lose the authority and credibility that they worked so hard to establish, and they worry that their partners will take advantage of them or take credit for their work. It is important to address conflict in ways that ultimately strengthen the partnership. Also be aware that when reaching out to local groups you may identify potential partners who receive tobacco industry funding. Your tobacco control agency or coalition may choose not to work with tobacco-sponsored groups, or it could offer these groups assistance with weaning themselves off industry funding and identifying alternative funding sources. For more information on this topic, see Chapter 2 in Communities of Excellence Plus in Tobacco Control Training and Resource Manual produced by the Tobacco Technical Assistance Consortium (TTAC). Contact TTAC at 404-712-8474 or ttac@spch.emory.edu.

References – Section 1

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Section 1
Supplemental Materials

Tip Sheet: Identifying and Involving Community Partners

Benefits of Involving Key Partners

It is important to recognize the value of involving community partners in both program planning and implementation. The benefits of involving community partners include:

- Building new relationships and maintaining existing partnerships
- Extending community outreach
- Increasing the ability to identify and tackle difficult or controversial issues
- Strengthening communication, framing issues in a variety of ways
- Expanding access to valuable skills and resources
- Connecting tobacco control issues with other community priorities
- Getting buy-in from the community partners
- Working with partners to identify and enlist others to support future activities

Engaging Community Partners

There are some initial planning steps that can maximize your efforts to recruit key partners. Begin by determining:

- Stakeholders or the groups potentially impacted by the tobacco control work proposed
- What kind and how many community partners are needed
- How to identify, locate, and enlist community partners

- Possible barriers that may be encountered in the recruitment process
- How these barriers can be overcome

Once you have examined and addressed these steps, consider the following when communicating with community partners:

- How do their interests intersect with yours? Frame the issue so they see it as a good fit with their mission and goals.
- Try to identify someone who could help you establish a relationship with the new partner. Perhaps this person could make a phone call on your behalf, help set up or attend a meeting, write a letter of introduction, or just mention the issue to a key contact.
- Be sensitive to constraints on their time and resources. New partners may prefer to participate in time-limited projects rather than becoming long-term members.
- Help them see what they could contribute to the effort. Be specific about where you need help and offer suggestions for activities they could undertake.
- Everyone needs to be appreciated for their good work, and this is especially true for partners who may be concerned about becoming too involved in tobacco issues. Provide lots of recognition for them and ensure that their experience with you is a positive one.

Plan to Recruit Community Partners

Tasks		Steps	Responsible Party	Timeline
Planning Tasks				
1.	Identify and make a list of stakeholders (i.e., the groups potentially impacted by the tobacco control work).			
2.	Identify and make a list of what kind and how many key partners are needed.			
3.	Educate yourself about potential partners • What are their primary issues? • In what area of the community do they work? • What is their history of policy and advocacy work? • What is their readiness for tobacco control work?			
Recruitment Tasks				
4.	Identify how you will locate and enlist community partners.			
5.	Identify how the interests of potential partners intersect with yours. Frame the issue so they see it as a good fit with their mission and goals.			

Plan to Recruit Community Partners *(continued)*

	Tasks	Steps	Responsible Party	Timeline
	Recruitment Tasks			
6.	Identify who could help you establish a relationship with the new potential partner. Perhaps this person could make a phone call on your behalf, help set up or attend a meeting, write a letter of introduction, or just mention the issue to a key contact.			
	Communication Tasks			
7.	Identify possible barriers that may be encountered in the recruitment process.			
8.	Identify how these barriers can be overcome: • Be sensitive to constraints on the individual's or agency's time and resources. New partners may prefer to participate in time-limited projects rather than becoming long-term members. Permit people to participate in ways other than attending meetings. • Help them see what they could contribute to the effort. • Be specific about where you need help and offer suggestions for activities they could undertake.			

Plan to Recruit Community Partners *(continued)*

Task	Plan	Responsible Party	Timeline
	Communication Tasks		
9. Create talking points for outreach to potential partners that describe: • Purpose of the partnership • How tobacco control goals link with the potential partnership agency's goals • Potential partners' possible contributions • Benefits of involvement; how their work might be enhanced • Time commitment and participation requirements • Support and resources that would be made available to them • How joint planning and activities would occur			
10. Identify how you will recognize the efforts of community partners. Everyone needs to be appreciated for their good work, and this is especially true for partners who may be concerned about becoming too involved in tobacco issues. Provide lots of recognition for them and ensure that their experience with you is a positive one.			

Section 2: Needs Assessment – The "Pre-trip" Research for Developing the Tobacco Control Plan

Key Points

- A needs assessment is the research that is conducted prior to the development of the tobacco control plan. Think of it as "pre-trip" planning.
- The California Department of Health Services, Tobacco Control Section (CDHS/TCS) requires Local Lead Agency tobacco control projects and some competitive grant tobacco control projects to complete a *formal CX needs assessment,* which involves completing prescribed forms that systematically assess and rate the community against a specified number of community indicators and assets, prioritizing the assessed needs, and then creating objectives and developing a plan to address the priorities identified through the assessment.
- CDHS/TCS requires other competitive grant tobacco control projects to provide a *narrative CX community assessment* based on indicators and assets pre-identified by CDHS/TCS in the request for application as a high priority for intervention across the state as a whole.
- The *formal CX needs assessment* uses both quantitative and qualitative data, including coalition member perceptions, to identify problems and justify that action is needed.
- Information identified through the needs assessment also provides insight into the type and nature of intervention activities that need to be addressed in the tobacco control plan (e.g., activities to build public support for the issue or to support more enforcement of existing policies).
- The *formal CX needs assessment,* in which indicators and assets are individually rated, also provides a means to monitor community progress towards achieving excellence in tobacco control.

"Pre-trip" Research for Developing the Tobacco Control Plan

Certainly one approach to travel is to spontaneously select a destination, cajole a few friends or family members into joining you, and then take off with nothing more than a full tank of gas, a packed suitcase, and a credit card; however, such an approach increases the risk of:

- Taking twice as long to get to your destination because you got lost without a map;

- Packing the wrong clothes for the weather or type of activities planned;
- Eating at a lot of greasy fast-food stops when your travel companions expected five-star cuisine;
- Fighting with your traveling companions over unmet expectations; and
- Spending more money than you had planned.

Similarly in tobacco control, sometimes one person or just a few agencies will decide to go in a specific direction that meets their own personal interests

without the benefit of assessing the community's needs or involving others in a collaborative assessment and decision-making process. Occasionally, these individuals are successful. However, it is also true that communities have found this approach to cost more in time and resources, to harm working relationships, to generate unnecessary opposition, and to result in an accomplishment that didn't reflect a meaningful public health gain.

The purpose of the CX needs assessment is to conduct research about several potential tobacco control issues prior to deciding upon the issues to be addressed and the activities to be included in the tobacco control plan. Since there are a vast number of tobacco use issues that a community could address, the CX indicators and assets help to focus and make the needs assessment process more manageable. Additionally, through the needs assessment process, possible activities are identified to address the problem (e.g., that the plan needs to include activities to improve public support or to create more media attention for an issue).

If you think of the tobacco control plan as the travel itinerary for the journey that an agency will undertake, then the CX needs assessment is the pre-trip research conducted prior to selecting and identifying the specific objectives and activities of the plan. The pre-trip research involves project staff, coalition members, or advisory committee members seeking out quantitative[1] and qualitative[2] data about specific community indicators and assets, agreeing upon priorities, and defining measurable objectives that will move the community towards excellence in tobacco control.

A project increases the likelihood that it will arrive at a destination that is important to the community, that can be defended to community leaders who may find a particular issue controversial, and that focuses limited resources on changing tangible community norms when it uses data to describe the community's needs, and when it involves community members in reviewing the data and setting priorities.

In summary, the CX needs assessment provides a process to talk things through with your traveling companions (e.g., coalition, advisory committee, or other key partners), and to agree that the destination is Yosemite rather than Pismo Beach. Then as the plan is developed, it is clear to your traveling companions that they need to pack hiking boots and a jacket instead of flip flops and a swimsuit, and the need to develop a strategy to hide food from the bears will be apparent to all.

How the CX Needs Assessment Aids Program Efforts

Assessing and rating the community as to how well it is performing in relationship to several community indicators[3] and assets[4] does not provide an absolute measure of the community's performance. Rather, it provides a rating that is based on quantitative data and qualitative data to come up with a numerical and descriptive rating of "None," "Poor," "Fair," "Good," or "Excellent" in relation to a specific tobacco control related indicator or asset.

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[1] Information from questionnaires, tests, standardized (fixed, unchanging) observation instruments, and program records. Focuses on things that can be counted, categorized, and subjected to statistical analysis.

[2] Information gathered from interviews, observations, or documents such as policy records, newspaper clippings, and correspondence. May include detailed descriptions of situations, events, people, interactions, observed behaviors, and people's thoughts about their experiences, attitudes, and beliefs.

[3] Indicators represent environmental or community level measures such as the amount of compliance with smoke-free work place laws in the community or the amount and type of tobacco company sponsorship in the community.

[4] Assets reflect characteristics about the community that indirectly facilitate tobacco control efforts. They include such things as the amount of funding available for tobacco control efforts, community capacity, and cultural competency.

The overall rating for each indicator incorporates data about nine attributes or characteristics that describe how well the community is doing in relationship to a specific indicator. If you think of the indicator as a major destination you are interested in visiting, such as China, the attributes reflect characteristics about a trip to China that you will research (e.g., hotels, restaurants, museums, tourist sites, transportation, climate, money exchange rate, etc.). Except that in the case of indicators, you will be researching the following attributes or characteristics:

1. Public Awareness
2. Public Support
3. Media Attention
4. Education/Awareness Campaign
5. Media Campaign
6. Voluntary Policy
7. Legislated Policy
8. Active Enforcement
9. Compliance

The overall rating assigned to each indicator factors in the rating given to each attribute to come up with an overall score (e.g., based on all your research how high would you rate China as a destination?). The CX needs assessment results reflect the community's perception of the data while boiling down the overall indicator rating into one number from 0 to 4. These numbers equate to the following descriptive terms: "None," "Poor," "Fair," "Good," or "Excellent." Using a single number or descriptive term makes it easier to communicate to decision-makers and your partners how well the community is doing on an issue, such as compliance with the state's clean indoor air worksite law. It also facilitates tracking progress towards excellence over time to gauge progress when the same indicator or asset is assessed several times.

To standardize the rating process, a rating guide is provided that gives descriptions of how to differentiate between the descriptive terms of "None" to "Excellent." The rating guide is similar to what you might use to rate the quality of a hotel or restaurant on Zagat (e.g., is it a two-star or three-star restaurant?).

An evaluation of the CX needs assessment process conducted in 2003 among California local health departments found several benefits to the formal CX needs assessment process. Approximately two-thirds of local health departments indicated that participating in the formal CX needs assessment process yielded results not anticipated prior to undertaking the assessment process. The greatest benefits identified tied to implementing the CX needs assessment process were that it provided a planning framework that assisted health departments to grasp the big picture with regards to tobacco issues in their community and it resulted in an increase in coalition and community involvement in tobacco control planning. No significant differences were found between rural and suburban/urban communities in how CX was perceived or implemented by local health departments.

CX Needs Assessment Methods

CDHS/TCS requires local health department tobacco control projects and some competitive grant tobacco control projects to complete a formal CX needs assessment that involves completing prescribed forms that systematically assess and rate the community against a specified number of community indicators and assets, prioritizing the assessed needs, creating objectives, and then developing a plan to address the priorities identified through the needs assessment. CDHS/TCS requires other competitive grant tobacco control projects to provide a narrative community assessment based on indicators and assets pre-identified by CDHS/TCS in the request for application as a high priority for intervention in the state as a whole.

The *formal* needs assessment process is used by CDHS/TCS with two types of procurements:

1. Where agencies are required to obtain the involvement and participation of local community organizations with special experience and expertise in community health education and representative of high-risk populations (e.g., Health and Safety Code Section 104405); and

2. With procurements addressing populations where little tobacco control efforts have previously been conducted.

The *formal* CX needs assessment process cannot be completed in a few hours. It requires the agency in charge of the effort to plan the planning process. See the Supplemental Materials at the end of this section for a *Principles of Community Planning Tip Sheet* and a *CX Needs Assessment and Plan Development Task Chart (Task Chart)*. The *Task Chart* is a helpful internal planning tool to track completion of major tasks and to maintain accountability. The *Principles of Community Planning Tip Sheet* or an adaptation of it may help communicate to community partners the ground rules that will guide the planning process, clarify expectations, facilitate accountability, and create a transparent planning process.

Preparing the "Travel Itinerary" (aka Tobacco Control Plan)

Figure 1 depicts the entire CX cycle. The process begins with the CX needs assessment, which informs creation of the objectives and activities that are the basis of the Program Plan. The CX needs assessment should be used to help identify the kinds of activities to include in the Plan. For example, the needs assessment may reveal that more public support is needed for an issue or that there is low public awareness about an issue, which would, in turn, indicate that more education and media are needed. The Program Plan drives development of the Evaluation Plan, which is a document that

Words of Wisdom from CX Veterans

- Clearly identify the purpose of the process for community members
- Take the time in the beginning to educate the advisory group or coalition fully about the process.
- Emphasize the fact that the information gathered will be used in a concrete way.
- Clarify expectations, roles, and responsibilities in advance of the CX process.
- Break up the CX process into small pieces. For example, invite advisory group/coalition members and community representatives with expertise in one particular area to focus on just one indicator or asset.
- Show the value of the process and how the process can lead to measurable results (e.g., new programs and additional funding).
- Recruit new players early in the process.
- Reach outside the agency or advisory group/coalition; bring in members of the community that are not members of the advisory group/coalition.
- Use agency staff to support the process by collecting available information, reviewing the data in small groups of staff and community members, and then have staff record key findings on the CX assessment worksheets. Review the draft forms with the coalition or advisory committee to add additional qualitative data and arrive at an overall rating for each indicator and asset.
- Publicize the results of the assessment on the coalition's or agency's Web site and in written materials.
- Be a cheerleader or salesperson — sell the community on the CX process.
- Keep it organized and systematic.

describes the kind of information you will track to fine tune and improve program efforts along the way and whether the program resulted in the change intended. Together, the Program and Evaluation Plan reflect the travel itinerary by describing the activities to be conducted, who will conduct the activities, when the activities will be conducted, and which records will be collected. As a result of the program, measurable changes in the community are anticipated. These Evaluation Results should be shared with the community and incorporated into future needs assessment efforts.

The entire CX process is akin to planning and taking a major trip. The major components of a tobacco control plan are as follows:

1. **CX Needs Assessment**: The pre-trip research conducted to prepare for the trip and prioritize destinations. You read travel books, research Web sites, and ask others about their experiences.

2. **Objectives**: Highlights of the trip's destination. They identify where you started from, where you are going, when you plan to arrive, and how you will know you have arrived.

3. **Intervention Activities**: The detailed itinerary, describing how you are going to get to your destination (i.e., the objective).

4. **Timelines**: The arrival and departure dates for major activities. They reflect how long you expect to spend at various junctions.

5. **Responsible Parties**: Your traveling companions, tour guides, and other people (both staff and non-budgeted volunteers/ coalition members) who are assigned various tasks on the trip.

6. **Tracking Measures**: The souvenirs that you intend to collect and save from the trip. They include things such as press releases, training materials, sign-in-sheets, and survey instruments.

7. **Evaluation Plan**: The activities that will help you identify mid-trip adjustments, identify those efforts that worked well or not, and the extent to which objectives were achieved (e.g., determining if the trip was successful, enjoyed by all, whether it went as planned, and the feedback to provide to establishments and partners so they can improve "customer service").

8. **Theory of Change**: The rationale that describes the basic assumptions about why the proposed interventions should work.

9. **Budget**: The budget provides the "gas" that makes everything go. It describes how much money you plan to spend on personnel, general operating expenses, equipment, media, and other items that you need to purchase for your trip.

Figure 1 - CX Cycle

Share Evaluation Results

Conduct CX Community Needs Assessment

Develop Program Plan

Develop Evaluation Plan

Implement the Program and Evaluation Plan
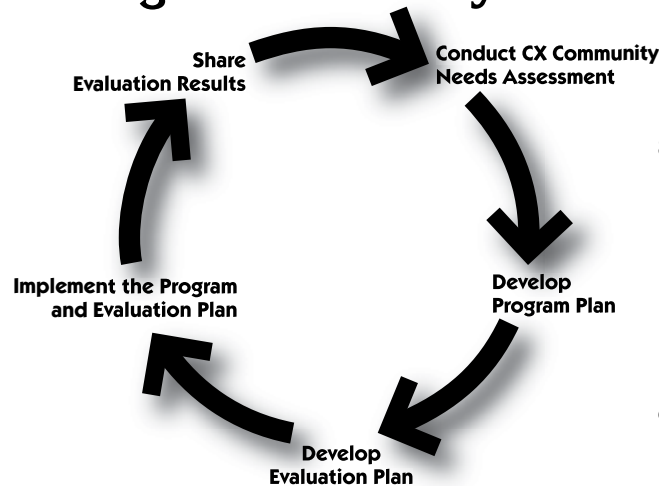
Section 2
Supplemental Materials

Tip Sheet: Principles of Community Planning

1. **Plan the process**: Determine who should be involved, the data needed, resistance you might encounter, the factors that will enhance the success of the planning process, and a time frame for the process.

2. **Plan with people**: Involve both professionals and consumers in the planning process. Opening this process up to a broad range of people expands expertise, increases understanding of the problem, generates more ideas, and creates a sense of ownership and commitment to the plan and its implementation.

3. **Plan with data**: Use data on the extent of the tobacco use problem, target groups, public perceptions about the problem and what should be done, and the resources available to address the problem (funds, skills, and experience).

4. **Plan for permanence**: Planning is a time intensive task. To make the most of the effort, planners should think in terms of initiating efforts that will create lasting change.

5. **Plan for priorities**: Address the issues that have the highest need and the greatest opportunity to make an impact, while recognizing that "early" wins are necessary to maintain motivation and gain momentum.

6. **Plan for impact and outcomes**: Determine how the world will be changed as a result of your efforts. Look beyond process measures such as counting the number of people reached or the creation of an advertising campaign. Strive to identify changes that influence the environment in which tobacco is used, sold, and promoted or the systems that affect the access and delivery of cessation services.

7. **Plan for evaluation**: During the planning phase, determine the data needed to measure impact and outcomes, the methods to collect data, when to collect data, who will collect the data, and how the data will be used to modify the program.

CX Needs Assessment and Plan Development Task Chart

Task	Responsible Party	Projected Completion Date
1. Attend CX Training.		
2. Review prior community planning processes, what worked well, and what needs improvement.		
3. Educate the coalition or advisory committee about CX and the Plan development process.		
4. Identify indicators and assets to assess.		
5. Develop a plan to collect data for each indicator and asset, identifying who is responsible, timelines, and possible data sources.		
6. Organize data collected into individual file folders for each indicator and asset, tracking the source and the time period that the data are from.		
7. Solicit and summarize information about local tobacco control efforts in the community by searching the Online Tobacco Information System (OTIS) Local Project Directory and talking to other funded projects. Handwritten information from the worksheets will be transferred into OTIS.		
8. Identify resource people beyond coalition members to provide additional information for the CX assessment.		
9. Organize small teams of staff and community members to review the data for a few indicators and assets. Summarize key data findings into the comment section of the worksheets, completing the data sources, and special population needs.		
10. Identify and assign coalition or advisory committee members to rate indicators and assets.		
11. Provide training on rating indicator and assets to coalition or advisory committee members.		
12. Finalize indicator and assets needs assessment worksheets. Provide any additional comments needed to justify ratings. Transfer the information from the final worksheets into OTIS.		

Task	Responsible Party	Projected Completion Date
13. Prioritize indicators and assets. Select those that will be developed into objectives and the focus/goal to be accomplished		
14. Draft objectives. Work with local program evaluator to write measurable objectives.		
15. Share draft objectives with coalition or advisory committee and obtain ideas for major strategies to accomplish objectives		
16. Assign objectives to staff to take the lead to draft program activities, timelines, who's responsible, tracking measures, etc.		
17. Assign evaluation plan development responsibilities for each objective.		
18. Assign responsibility for completion of other portions of the Plan, e.g., coalition information, narrative, theory of change, budget, etc.		
19. Complete draft Plan & Budget in OTIS. Print copies and review for accuracy.		
20. Submit final Plan & Budget to CDHS/TCS.		
21. Negotiate Plan & Budget with CDHS/TCS.		
22. Communicate final product Plan & Budget back to community members.		
23. Provide recognition to community members for their contributions.		
24. Review CX needs assessment and plan development process (e.g., what worked well, what needs improvement. Write this summary down for use the next time).		

Section 3: Community Indicators and Community Assets – Possible Travel Destinations

Key Points

- Community indicators and community assets are signposts to consider as you plan your "trip."
- There are two levels of community at which the assessment can be conducted. One is to define the community as a geographically coherent place area such as a city, county, tribal land, or political district. Another is to define the community by an attribute other than geography, such as by race/ethnicity, sexual orientation, socioeconomic status, or field of employment (e.g., military, labor).
- Community indicators represent environmental or community level measures. They are generally based on observations or aspects of the community other than those associated with individuals.
- Community assets represent factors that promote and sustain tobacco control efforts in the community by facilitating tobacco control work. Assets include such things as the level of funding available for tobacco control work, the level of community activism among adults and youth, and awareness of, and sensitivity to, cultural diversity.
- Each community indicator is assigned a unique three-digit number. The first number assigned designates the priority area, the second number assigned designates a subcategory within the priority area, and the third number assigned reflects a consecutive numerical ordering for all the indicators in that subcategory.
- Each community asset is assigned a unique two-digit number. The first number assigned designates the asset category and the second number assigned reflects a consecutive numerical ordering for all the assets within that category.

What is a Community?

There are two levels of community at which the CX assessment can be conducted. One is to assess a community by defining it as a geographically coherent area such as a city, county, tribal land, or political district. Another is to assess a community that is defined by an attribute other than geography such as race/ethnicity, sexual orientation, or field of employment (e.g., military, labor).

The procurement under which an agency applies to CDHS/TCS for funding will provide the definition of community that should be used in conducting the CX needs assessment.

Understanding Indicators and Assets

A complete list of the CX indicators and assets can be found in the Supplemental Materials of this section.

Community indicators represent environmental or community level measures. They are based on observations or aspects of the community other than those associated with individuals. The assessment of each indicator involves using data to answer the question "how much" or "to what extent" the issue is addressed in the community of interest and

assigning a numerical value to the final analysis and response to the question. An indicator may look at a tobacco control issue from multiple perspectives as demonstrated below.

An example of a community indicator is as follows:

1.1.6   Number and type of tobacco company sponsorship at public and private events including county fairs, rodeo, motor sports, other sporting events, parades, concerts, museums, dances, festivals, business, etc.

-or-

Proportion of entertainment and sporting venues with a voluntary policy that regulates tobacco company sponsorship including county fairs, rodeo, motor sports, other sporting events, parades, concerts, museums, dances, festivals, business, etc.

-or-

Proportion of communities with a policy that regulates tobacco company sponsorship at entertainment and sporting venues such as fairgrounds, concerts, museums, and events such as dance, business, festivals, etc.

Organization of Community Indicators

Each community indicator is assigned a unique three-digit number. The first number assigned designates the priority area, the second number assigned designates a subcategory within the priority area, and the third number assigned reflects a consecutive numerical ordering for all the indicators in that subcategory. Following is a list of each of the four priority areas and the subcategories for each priority area:

Priority Area 1: Counter Pro-Tobacco Influences

    1.1: Tobacco marketing and deglamorization indicators

    1.2: Reduce tobacco industry influence economic indicators

    1.3: School and community-based prevention indicators

    1.4: Physical environment indicators

    1.5: Global tobacco control movement indicators

Priority Area 2: Reduce Exposure to Secondhand Smoke

    2.1: Reduce exposure to secondhand smoke enforcement/compliance indicators

    2.2: Reduce exposure to secondhand smoke policy indicators

Priority Area 3: Reduce the Availability of Tobacco

    3.1: Reduce the availability of tobacco enforcement/compliance indicators

    3.2: Reduce the availability of tobacco policy indicators

    3.3: Reduce the availability of tobacco behavior indicators

Priority Area 4: Promote Tobacco Cessation Services

    4.1: Provision of cessation services indicators

    4.2: Cessation policy indicators

For example, indicator 3.2.2 "Proportion of communities with a zoning policy that regulates the number, location, and density of tobacco retail outlets" is in priority area number 3 (indicators related to reducing the availability of tobacco), subcategory number 2 (policy indicators), and is the second indicator in that subcategory.

Organization of Community Assets

Community assets represent factors that promote and sustain tobacco control efforts in the community by facilitating tobacco control work. Assets include such things as the level of funding available for tobacco control work, the level of community activism among adults and youth, and awareness of and sensitivity to cultural diversity. As with the assessment of indicators, the assessment of assets involves using data to answer the question "how much" or "to what extent" the issue is addressed in the community of interest and assigning a numerical value to the final analysis and response to the question.

An example of a community asset is as follows:

1.2 Amount of MSA funds that are appropriated for the purpose of tobacco control activities

Community assets are organized into three major categories:

1. Tobacco Control Funding Assets (Money available for tobacco control efforts)
2. Social Capital Assets (People resources and capacity to address tobacco control efforts)
3. Cultural Diversity and Cultural Competency Assets (Organizational and community capacity to address diversity in tobacco control)

Each community asset is assigned a unique two-digit number. The first number assigned designates the asset category and the second number assigned reflects a consecutive numerical ordering for all the assets within that category. For example, community asset 2.4, "Amount of community activism among youth to support tobacco control" is in category 2 (social capital assets) and is the fourth asset on the list of assets in this category.

Where did the CX Community Indicators and Assets Come from?

The original set of community indicators and assets were developed in 2000 by CDHS/TCS, and relied upon the expert advice of a workgroup composed of local health departments, ethnic networks, regional community linkage projects, voluntary health groups, and universities. In 2003, CDHS/TCS again solicited new and revised CX indicators and assets from California's tobacco control community. In 2004, CDHS/TCS sought the input of African American, Asian and Pacific Islander, American Indian, Hispanic/Latino, Lesbian/Gay/Bisexual/Transgender, and Low Socioeconomic Status groups to modify and expand the CX indicators and assets.

In 2006, CDHS/TCS again invited its 127 funded tobacco control projects to suggest revisions to the indicators and assets. Over 50 recommendations were received. The criteria for reviewing recommendations are listed below. Additionally, the 2006 process included editing the wording of indicators to be more consistent with the wording of similar indicators used by the Centers for Disease Control and Prevention, Office on Smoking and Health in *Key Outcome Indicators for Evaluating Comprehensive Tobacco Control Programs, 2005.*

Criteria for Adding New Indicators and Assets

1. The proposed indicator/asset must be measurable.
2. The proposed indicator must address a community norm level change versus individual level change, such as tobacco use prevalence, awareness, knowledge, attitudes, or beliefs.
3. The proposed asset must address a community factor that indirectly promotes and sustains tobacco control efforts in the community by improving the quantity or quality of fiscal resources, community involvement, staff capacity, or cultural diversity/competency for tobacco control efforts.
4. There must be some evidence-based (scientific or empirical) rationale to assure that addressing the proposed indicator would counter pro-tobacco influences in the community, reduce exposure and/or tolerance of exposure to secondhand smoke, reduce the availability of tobacco, or promote cessation services.
5. There must be some evidence-based (scientific or empirical) rationale that addressing the proposed asset would facilitate tobacco control efforts locally.
6. The proposed indicator/asset must not duplicate or conflict with an existing indicator.

Section 3
Supplemental Materials

CX Indicators List and CX Assets List

Communities of Excellence Indicators

Priority Area: Counter Pro-Tobacco Influences (1)
Tobacco Marketing and Deglamorization Indicators (.1)

Definition: Addresses the 1) marketing tactics used to promote tobacco products and their use, 2) public image of tobacco companies, and 3) activities to counter the marketing, glamorization, and normalization of tobacco use.

Community Indicator

1.1.1	Number and type of in-store tobacco advertising and promotions
	-or-
	Proportion of businesses with voluntary policies that regulate the extent and type of in-store tobacco ads and promotions
1.1.2	Number and type of tobacco advertising and promotions outside of stores
	-or-
	Proportion of businesses with a voluntary policy that regulates the extent and type of tobacco advertising and promotions outside of stores
1.1.3	Number and type of tobacco advertisements in print media such as magazines and newspapers
	-or-
	Proportion of print media organizations (e.g., magazines and newspapers) with a voluntary policy that regulates tobacco advertising
1.1.4	Number and type of tobacco billboards that do not exceed 14 square feet that appear on the property of retail stores
1.1.5	Number and type of Master Settlement Agreement violations by tobacco companies for outdoor advertising, print advertising, sponsorship, and promotional requirements
1.1.6	Number and type of tobacco company sponsorship at public and private events including county fairs, rodeo, motor sports, other sporting events, parades, concerts, museums, dances, festivals, business, etc.
	-or-
	Proportion of entertainment and sporting venues with a voluntary policy that regulates tobacco company sponsorship including county fairs, rodeo, motor sports, other sporting events, parades, concerts, museums, dances, festivals, business, etc.
	-or-
	Proportion of communities with a policy that regulates tobacco company sponsorship at entertainment and sporting venues such as fairgrounds, concerts, museums, and events such as dance, business, festivals, etc.

Community Indicator
1.1.7   Number and type of tobacco company sponsorship and advertising at bars and clubs -or- Proportion of bars and clubs with a voluntary policy prohibiting tobacco-company sponsorship and advertising
1.1.8   Number and type of tobacco company sponsorship and advertising at college-related events -or- Proportion of colleges with a policy that regulates tobacco company sponsorship and advertising
1.1.9   Amount of tobacco company contributions to institutions and groups such as education, research, public health, women's, cultural, entertainment, fraternity/sorority groups, and social service institutions -or- Proportion of groups and institutions such as education, research, public health, women's, cultural, entertainment, fraternity/sorority groups, and social service institutions that have a voluntary policy prohibiting tobacco company contributions
1.1.10   Amount of tobacco industry contributions to support political campaigns of elected officials or political caucuses -or- Proportion of elected officials or political caucuses that have signed a pledge not to accept tobacco company contributions
1.1.11   Number and type of tobacco use, tobacco advertising, and secondhand smoke depiction by the entertainment industry (e.g., movies, music videos, TV, music, etc.) -or- The extent that elected officials, parent organizations, health groups, and others adopt resolutions and voluntary policies that promote a socially responsible depiction of tobacco use, tobacco advertising, and secondhand smoke by the entertainment industry (e.g., movies, music videos, TV, music, etc.)
1.1.12   Extent of the availability of candy look-alike tobacco products -or- Proportion of businesses that adopt a voluntary policy not to sell candy look-alike tobacco products
1.1.13   Amount and quality of news media stories about tobacco industry practices and political lobbying
1.1.14   Proportion of schools or school districts that have a policy regulating the display or wearing of tobacco promotional items at school

Priority Area: Counter Pro-Tobacco Influences (1)
Reduce Tobacco Industry Influence Economic Indicators (.2)

Definition: The economic indicators address the financial incentives and disincentives that can be implemented to promote non-tobacco use norms.

Community Indicator

1.2.1	Number and type of public (e.g., county and city government) and private institutions (e.g., unions; private universities) divested from tobacco stock
1.2.2	Number and type of public and private employers that offer discounted health insurance premiums for non-tobacco users
1.2.3	Number and type of public school districts, public institutions (e.g., hospitals, correctional facilities, public health departments), social service agencies, or conferences that adopt a policy indicating that tobacco company subsidiary food products will not be bought or accepted as donations
1.2.4	Proportion of communities with policies that increase the price of tobacco products and generate revenue with a portion of the revenue earmarked for tobacco control efforts (e.g., taxes, mitigation fees)

Priority Area: Counter Pro-Tobacco Influences (1)
School and Community-based Prevention Indicators (.3)

Definition: The school and community-based prevention community indicators address the availability and provision of tobacco use prevention education that impacts youths in school and youth serving programs, such as the Scouts or 4-H.

Community Indicator

1.3.1	Proportion of schools that provide instruction on tobacco-use prevention that meets CDC guidelines (e.g., intensive tobacco use prevention instruction in junior high/middle school years with reinforcement in high school using a curricula that provides instruction on the negative physiologic and social consequences of tobacco use, social influences on tobacco use, peer norms regarding tobacco use, and refusal skills)
1.3.2	Proportion of schools or school districts that provide tobacco use prevention specific instruction for teachers
1.3.3	Proportion of schools or school districts that involve families in support of school-based tobacco use prevention or cessation programs
1.3.4	Proportion of youth serving programs (e.g., 4-H, Girl Scouts, etc.) that provide intensive tobacco use prevention instruction using a curricula that provides instruction on the negative physiologic and social consequences of tobacco use, social influences on tobacco use, peer norms regarding tobacco use, and refusal skills

Priority Area: Countering Pro-Tobacco Influences (1)
Physical Environment Indicators (.4)

Definition: The physical environment community indicators address the pollution and safety hazards posed to the natural environment by the production and use of tobacco products.

Community Indicator
1.4.1   The amount of tobacco-related litter at public places including parks, playgrounds, beaches, etc.
-or-
Proportion of communities with a policy that prohibits tobacco litter in public places including parks, playgrounds, beaches, etc.
~~1.4.2~~   **Retired due to state fire safe cigarette legislation in 2006** ~~Extent that low-income housing complexes have cigarette related fire prevention policies~~

Priority Area: Countering Pro-Tobacco Influences (1)
Global Movement Indicators (.5)

Definition: The Global Movement community indicators address 1) countering the national and international sale and promotion of tobacco products by tobacco companies in other states and countries; and 2) building the capacity of other states and countries to respond to the marketing and sales practices of tobacco companies.

Community Indicator
1.5.1   Number of local resolutions in support of national policies to hold U. S. tobacco companies to the same standards in the sale and marketing of their products nationally and internationally
1.5.2   Number of local resolutions in support of national policies to hold U. S. tobacco companies to the same standards in their production of tobacco products nationally and internationally (*e.g.*, pesticide use, genetic engineering, etc.)
1.5.3   Number of local resolutions in support of the WHO Framework Convention on Tobacco Control
1.5.4   Amount and quality of information and resources exchanged between local and national/ international tobacco control efforts for the purpose of countering tobacco industry marketing and sales

Priority Area: Reduce Exposure to Secondhand Smoke (2)
Reduce Exposure to Secondhand Smoke Enforcement/Compliance Indicators (.1)

Definition: These community indicators address enforcement and/or compliance of policies intended to reduce or control exposure to secondhand smoke in indoor and outdoor settings. In the following indicators, "enforcement agencies" means those agencies that are designated by law or by a governmental agency with the authority to enforce policies, laws, and regulations. In the following indicators, multi-unit housing means those dwellings containing two or more housing units, including, but not limited to, market rate rental housing, condominiums, town homes, subsidized and affordable public housing, and single residency occupancy hotels.

Community Indicator

2.1.1   Number of compliance checks conducted by enforcement agencies for violations of indoor smoke-free worksite policies, **excluding bars and gaming** policies

-or-

Number of warnings, citations, and fines issued for violations of indoor smoke-free worksite policies, **excluding bars and gaming** policies

-or-

Proportion of worksites in compliance with indoor smoke-free worksite policies **excluding bars and gaming** policies

2.1.2   Number of compliance checks conducted by tribal enforcement agencies for violations with American Indian tribal indoor smoke-free worksite policies, **excluding gaming/leisure complexes** policies

-or-

Number of warnings, citations, and fines issued by tribal enforcement agencies for violations of indoor smoke-free worksite policies, **excluding gaming/leisure complexes** policies

-or-

Proportion of worksites in compliance with indoor smoke-free American Indian worksite policies, **excluding gaming/leisure complexes** policies

2.1.3   Number of compliance checks conducted by enforcement agencies for violations of indoor smoke-free bar and gaming worksite policies

-or-

Number of warnings, citations, and fines issued for violations of indoor smoke-free bar and gaming worksite policies

-or-

Proportion of worksites in compliance with indoor smoke-free bar and gaming worksite policies

2.1.4   Number of compliance checks conducted by American Indian enforcement agencies for violations of American Indian tribal indoor smoke-free gaming/leisure complex worksite policies

-or-

Number of warnings, citations, and fines issued by American Indian enforcement agencies for violations of American Indian tribal indoor smoke-free gaming/leisure complex worksite policies

-or-

Proportion of worksites in compliance with American Indian tribal indoor smoke-free gaming/leisure complex worksite policies

	Community Indicator
2.1.5	Proportion of schools or school districts in compliance with the state law that prohibits the use of tobacco by all students, school staff, parents, and visitors in public school district-owned or leased buildings, on district grounds, and in district vehicles
2.1.6	Number of compliance checks conducted by enforcement agencies for violations of policies that prohibit smoking within 20 feet or more of doorways, windows, vents, and openings -or- Number of warnings, citations and fines issued for violations of policies that prohibit smoking within 20 feet or more of doorways, windows, vents, and openings -or- Proportion of worksites in compliance with policies that prohibit smoking within 20 feet or more of doorways, windows, vents, and openings
2.1.7	Number of compliance checks conducted by enforcement agencies for violations of policies that regulate smoking in outdoor recreational facilities, areas, and venues such as amusement parks, beaches, fairgrounds, parks, parades, piers, playgrounds, sport stadiums, tot lots, and zoos -or- Number of warnings, citations and fines issued for violations of policies that regulate smoking in outdoor recreational facilities, areas, and venues such as amusement parks, beaches, fairgrounds, parks, parades, piers, playgrounds, sport stadiums, tot lots, and zoos -or- Proportion of outdoor recreational facilities, areas, and venues in compliance with policies that regulate smoking in places such as amusement parks, beaches, fairgrounds, parks, parades, piers, playgrounds, sport stadiums, tot lots, and zoos
2.1.8	Proportion of communities with policies that include enforcement mechanisms in smoke-free multi-unit housing laws, such as enforcement by government agencies, enforcement by tenants and/or landlords; and enforcement by private citizens
2.1.9	Number of compliance checks conducted by enforcement agencies for violations of policies that regulate smoking in vehicles when minors are present —or— Number of warnings, citations, or fines issued for violations of policies that regulate smoking in vehicles when minors are present -or- Proportion of vehicles in compliance with policies that prohibit smoking in vehicles when minors are present *(Please note, no such state, local, or tribal law exists as of 8/2006. This indicator is looking toward the future.)*

Community Indicator
2.1.10   Number of compliance checks conducted by enforcement agencies for violations of policies that regulate smoking in outdoor public areas not primarily intended for recreational use, such as walkways, streets, plazas, college campuses, shopping centers, transit stops, farmers markets, swap meets -or- Number of warnings, citations, or fines issued for violations of policies that regulate smoking in outdoor public areas not primarily intended for recreational use, such as walkways, streets, plazas, college campuses, shopping centers, transit stops, farmers markets, swap meets -or- Proportion of public places, not primarily intended for recreational use, that are in compliance with policies that regulate smoking in these places such as public walkways, streets, plazas, college campuses, shopping centers, transit stops, farmers markets, and swap meets

Priority Area: Reduce Exposure to Secondhand Smoke (2)
Reduce Exposure to Secondhand Smoke Policy Indicators (.2)

Definition: These community indicators address the adoption of policies to reduce or control exposure to secondhand smoke in indoor and outdoor settings by families, agencies, organizations, businesses, boards, government bodies, and others. In the following indicators, multi-unit housing means those dwellings containing two or more housing units, including, but not limited to, market rate rental housing, condominiums, town homes, subsidized and affordable public housing, and single residency occupancy hotels.

Community Indicator
2.2.1   Proportion of homes with a smoker in the household who report their home is smoke-free -or- Proportion of families with a policy that does not permit smoking in the home
2.2.2   Proportion of families with a smoker who report their personal vehicles are smoke-free -or- The proportion of families with a policy that does not permit smoking in their personal vehicles
2.2.3   Proportion of businesses on American Indian lands with a voluntary smoke-free workplace policy, excluding casino/leisure complexes, that is consistent with protection provided to other California workers under California Labor Code 6404.5 -or- Proportion of American Indian tribes with a smoke-free worksite policy, **excluding casino/leisure complexes**, that is consistent with protection provided to other California workers under California Labor Code 6404.5
2.2.4   Proportion of communities with a policy that regulates indoor worksite smoking in those areas that are exempted by the state smoke-free workplace law, such as owner operated bars and tobacco shops (**excluding hotels**)

Community Indicator
2.2.5   Proportion of hotels/motels with a voluntary policy that designates the following areas as smoke-free: guest rooms, guest room balconies and patios, lobbies, and outdoor common areas such as swimming pools, dining patios, reception areas, hotel entrances, etc. -or- Proportion of communities with hotel/motel policies that designates the following areas as smoke-free: guest rooms, guest room balconies and patios, lobbies, and outdoor common areas such as swimming pools, dining patios, reception areas, hotel entrances, etc.
2.2.6   Proportion of outdoor restaurant and bar businesses with a voluntary policy that designates outdoor dining and bar areas as smoke-free, including use of cigarettes, cigars, and hookahs -or- Proportion of communities with a policy that designates outdoor dining and bar areas as smoke-free, including use of cigarettes, cigars, and hookahs
2.2.7   Proportion of non-dining outdoor worksites (e.g. construction sites, lumber mills, forests) with a voluntary policy designating the worksite as smoke-free -or- Proportion of communities with a policy that designates non-dining outdoor worksites (e.g., construction sites, lumber mills, forests) as smoke-free
2.2.8   Proportion of worksites with a voluntary policy that prohibits smoking within 20 feet or more of all doorways, windows, vents, and openings -or- Proportion of communities with a policy that prohibits smoking within 20 feet or more of all doorways, windows, vents, and openings
2.2.9   Proportion of outdoor public areas, not primarily intended for recreational use, with a voluntary policy that regulates smoking, such as walkways, streets, plazas, college campuses, shopping centers, transit stops, farmers markets, swap meets -or- Proportion of communities with a policy regulating smoking at outdoor public areas that are not primarily intended for recreational use, such as walkways, streets, plazas, school college campuses, shopping centers, transit stops, farmers markets, swap meets
2.2.10   Proportion of health care facilities, drug and rehab facilities, and residential care facilities for the elderly, developmentally disabled, or mentally disabled with a voluntary policy that prohibits smoking by employees, residents, and visitors on the premises
2.2.11   Proportion of multi-unit housing complexes with a voluntary policy that designates common outdoor areas as smoke-free, such as playground, swimming pool area, and entrances -or- Proportion of communities with a policy that designates outdoor common areas of multi-unit housing complexes as smoke-free, such as playground, swimming pool area, and entrances, and/or resolutions encouraging owners, managers, or developers of multi-unit housing to adopt policies creating smoke-free outdoor common areas

Community Indicator
2.2.12	Proportion of multi-unit housing complexes with a voluntary policy designating indoor common areas as smoke-free, such as laundry room, hallways, stairways, and lobby area
	-or-
	Proportion of communities with a multi-unit housing policy that prohibits smoking in indoor common areas such as laundry room, hallways, stairways, and lobby areas, and/or resolutions encouraging owners, managers, or developers of multi-unit housing to adopt policies creating smoke-free indoor common areas
2.2.13	Proportion of multi-unit housing owners and/or operators with a voluntary policy that restricts smoking in individual units (including balconies and patios)
	-or-
	Proportion of communities with a policy that restricts smoking in the individual units of multi-unit housing (including balconies and patios), and/or resolutions encouraging owners, managers, or developers of multi-unit housing to adopt policies creating smoke-free individual units.
2.2.14	**Retired. Single resident occupancy hotel will be encompassed in the definition of multi-unit housing**
	~~Extent that single resident occupancy hotel rooms designate a portion of rooms and common indoor areas as smoke-free. (e.g., laundry room, hallways, stairways, lobby)~~
2.2.15	**Retired. Single resident occupancy hotel will be encompassed in the definition of multi-unit housing**
	~~Extent that single resident occupancy hotel rooms adopt policies designating common outdoor areas as smoke-free, (e.g., playgrounds, swimming pool, entrances)~~
2.2.16	Proportion of outdoor recreational facilities, areas, and venues with a voluntary policy that regulates smoking in places such as amusement parks, beaches, fairgrounds, parks, parades, piers, playgrounds, sport stadiums, tot lots, and zoos
	-or-
	Proportion of communities with a policy that regulates smoking at outdoor recreational facilities, areas, and venues in places such as amusement parks, beaches, fairgrounds, parks, parades, piers, playgrounds, sport stadiums, tot lots, and zoos
2.2.17	Proportion of private elementary and high schools that designate campuses as tobacco-free (*Note, state law requires public schools to be tobacco-free vs. smoke-free, which is why this indicator uses the term tobacco-free*)
2.2.18	Proportion of foster care homes or agencies with a voluntary policy that regulates smoking
	-or-
	Proportion of communities with a policy or resolution that regulates smoking within foster care homes

Community Indicator	
2.2.19	Proportion of businesses and venues with a voluntary policy that regulates smoking in outdoor waiting lines (e.g., movie theaters, sporting events, entertainment events, food service, restrooms, ATMs, etc.) -or- Proportion of communities with a policy that regulates smoking in outdoor waiting lines (e.g., movie theaters, sporting events, entertainment events, food service, restrooms, ATMs, etc.)
2.2.20	Proportion of faith community organizations (e.g., churches, synagogues, mosques, and temples) with a policy that regulates smoking on their grounds and at events
2.2.21	Proportion of communities with a policy that prohibits smoking in cars when minors are present
2.2.22	Proportion of communities that use zoning regulations, building codes, housing or other general plan elements, HUD consolidated plans, permitting processes, etc. to increase the amount of smoke-free indoor or outdoor areas in multi-unit housing
2.2.23	Proportion of communities with a policy that requires landlords, affordable housing providers, condo associations, single residency occupancy hotels, and other similar groups to disclose the location of smoking and non-smoking units, the smoking history of a unit, and require rental vacancy listings to include a category for smoking and non-smoking units
2.2.24	Proportion of communities with a policy declaring non-consensual exposure to secondhand smoke as a nuisance
2.2.25	Proportion of businesses with a voluntary policy that designates American Indian casino/leisure complexes as smoke-free to a level that is consistent with protection provided to other California workers under California Labor Code 6404.5 -or- Proportion of American Indian tribes with a policy that designates casino/leisure complexes as smoke-free to a level that is consistent with protection provided to other California workers under California Labor Code 6404.5

Priority Area: Reduce the Availability of Tobacco (3)
Reduce the Availability of Tobacco Enforcement/Compliance Indicators (.1)

Definition: These community indicators address enforcement and/or compliance of state or local legislated policies intended to control the sale, distribution, sampling, or furnishing of tobacco products or nicotine containing products that are promoted as reducing harm for the user, but which are not intended to result in cessation of tobacco use. Enforcement agencies are those that are designated by law or by a governmental agency with the authority to enforce policies, laws, and regulations.

Community Indicator

3.1.1   Number of compliance checks conducted by enforcement agencies for violations of policies that prohibit the sale of tobacco sales to minors and that require ID checking

-or-

Number of warnings, citations, and fines issued for violating policies that prohibit the sale of tobacco to minors and that require ID checking

-or-

Proportion of tobacco retailers in compliance with policies that prohibit the sale of tobacco to minors and that require ID checking

3.1.2   Number of compliance checks conducted by enforcement agencies for violations of policies that require tobacco retailers to post the STAKE Act age-of-sale warning sign

-or-

Number of warnings, citations, and fines issued for violations of policies that require tobacco retailers to post the STAKE Act age-of-sale warning sign

-or-

Proportion of tobacco retailers in compliance with policies that require tobacco retailers to post the STAKE Act age-of-sale warning sign

3.1.3   Number of compliance checks conducted by enforcement agencies for violations of policies that prohibit the sale of cigarettes and other tobacco products from self-service displays

-or-

Number of warnings, citations, and fines issued for violations of policies that prohibit the sale of cigarettes and other tobacco products from self-service displays

-or-

Proportion of tobacco retailers in compliance with policies that prohibit the sale of cigarettes and other tobacco products from self-service displays

3.1.4   Number of compliance checks conducted by enforcement agencies for violations of policies that prohibit the sale of bidis to businesses where minors are not allowed access

-or-

Number of warnings, citations, and fines issued for violations of policies that prohibit the sale of bidis to businesses where minors are not allowed access

-or-

Proportion of businesses in compliance with policies that prohibit the sale of bidis to businesses where minors are not allowed access

Community Indicator
3.1.5   Number of compliance checks conducted by enforcement agencies for violations of policies that restrict the placement of tobacco vending machines -or- Number of warnings, citations, and fines issued for violations of policies that restrict the placement of tobacco vending machines -or- Proportion of businesses in compliance with policies that restrict the placement of tobacco vending machines
3.1.6   Number of compliance checks conducted by enforcement agencies for violations of policies that prohibit the sale of single cigarettes -or- Number of warnings, citations, and fines issued for violations of policies that prohibit the sale of single cigarettes -or- Proportion of businesses in compliance with policies that prohibit the sale of single cigarettes
3.1.7   Number and type of Master Settlement Agreement violations by tobacco companies or tobacco sale and distribution requirements
3.1.8   Number of agencies that include bidis, cigars, smokeless tobacco, hookah tobacco, or nicotine-related products not meant for cessation as part of compliance checks for enforcement of illegal tobacco sales to minors
3.1.9   Number of compliance checks conducted by enforcement agencies for violations of policies that prohibit the distribution of free or low-cost tobacco products, coupons, coupon offers, or rebate offers for tobacco products -or- Number of warnings, citations, and fines issued for violations of policies that prohibit the distribution of free or low-cost tobacco products, coupons, coupon offers, or rebate offers for tobacco products -or- Proportion of venues and business in compliance with policies that prohibit the distribution of free or low-cost tobacco products, coupons, coupon offers, or rebate offers for tobacco products
3.1.10   Number of compliance checks conducted by enforcement agencies for violations of policies that require tobacco retailers to post their tobacco retail license —or- Number of warnings, citations, and fines issued for violations of policies that require tobacco retailers to post their tobacco retail license -or- Proportion of tobacco retailers in compliance with policies that require tobacco retailers to post their tobacco retail license

	Priority Area: Reduce the Availability of Tobacco (3) **Reduce the Availability of Tobacco Policy Indicators (.2)**

Definition: These community indicators address the adoption of voluntary or legislated policies intended to control the sale, distribution, sampling, or furnishing of tobacco products or nicotine containing products that are promoted as reducing harm for the user, but which are not intended to result in cessation of tobacco use.

	Community Indicator
3.2.1	The proportion of communities with a tobacco retail licensing policy that earmarks a portion of the license fee for enforcement activities
3.2.2	Proportion of communities with a zoning policy that regulates the number, location, and density of tobacco retail outlets (e.g., conditional use permits)
~~3.2.3~~	**Retired. State legislation is very comprehensive in this area. Directing additional resources towards the few exemptions in state law would not make a sufficient public health impact.** ~~The proportion of communities with policies that prohibit the sale of all tobacco products (e.g., cigarettes, smokeless tobacco and cigars) through self-service displays and which require tobacco products to be in a locked or covered case~~
3.2.4	Proportion of venues with voluntary policy that prohibits the distribution of free or low-cost tobacco products, coupons, coupon offers, or rebate offers for tobacco products -or- Proportion of communities or events with a policy that prohibits the distribution of free or low-cost tobacco products, coupons, coupon offers, or rebate offers for tobacco products
3.2.5	The proportion of communities with a policy that eliminates all tobacco vending machine sales
3.2.6	The proportion of communities with a policy that prohibits tobacco sales via mobile vendors
3.2.7	The proportion of independent and chain pharmacy stores with a voluntary policy to NOT sell tobacco products -or- Proportion of communities with a policy that prohibits the sale of tobacco products by independent and chain pharmacy stores
3.2.8	Proportion of communities with a policy or resolution that regulates the sale of tobacco and nicotine containing products that are not intended to facilitate tobacco cessation, but rather are promoted as having lower health risks in comparison to traditional tobacco products or that are promoted for use in lieu of smoking where smoking is not permitted

Priority Area: Reduce the Availability of Tobacco (3)
Behavior Indicators (.3)

Definition: These community indicators address individual behaviors related to controlling the sale, distribution, sampling, or furnishing of tobacco products or nicotine containing products that are promoted as reducing harm for the user, but that are not intended to result in cessation of tobacco use.

Community Indicator

3.3.1	Proportion of minors reporting they have received tobacco products from a social source

Priority Area: Promote Tobacco Cessation Services (4)
Provision of Cessation Services Indicators (.1)

Definition: These community indicators address the direct provision of culturally and linguistically appropriate cessation services or pharmacotherapy (not provided as part of a health insurance benefit).

Community Indicator

4.1.1	Number of culturally and linguistically appropriate behavior modification-based tobacco cessation services that are available and well utilized in the community
4.1.2	Proportion of schools or school districts that support cessation interventions for students and staff who use tobacco (e.g., counseling for students and staff who use tobacco or referrals to tobacco cessation programs)
4.1.3	Number of tobacco cessation programs that provide free or low cost pharmacological quitting aids for cessation program participants who are not eligible for this benefit through a government or employer subsidized health insurance plan, and link the provision of free or low cost pharmacologic quitting aids to behavior modification-based tobacco cessation services

Priority Area: Promote Tobacco Cessation Services (4)
Cessation Policy Indicators (.2)

Definition: These community indicators address the adoption of voluntary or legislated policies designed to promote the availability of behavior modification tobacco cessation services and adjunct pharmacotherapy to aid tobacco cessation.

Community Indicator	
4.2.1	Number of public employee health insurance purchasers that require the provision of tobacco cessation behavior and pharmacotherapy services consistent with the U.S. Public Health Service clinical practice guidelines *Treating Tobacco Use and Dependence*
4.2.2	Number of managed care organizations in the community that have implemented the U.S. Public Health Service clinical practice guidelines *Treating Tobacco Use and Dependence*
4.2.3	Extent of policies that restrict or prohibit use of alternative tobacco products (e.g., smokeless tobacco) at the worksite
4.2.4	Number of alcohol and drug treatment, mental health treatment, migrant clinics, and other health or social service agencies that have implemented the U.S. Public Health Service clinical practice guidelines *Treating Tobacco Use and Dependence*

Communities of Excellence Assets

Tobacco Control Funding Assets (1)

Definition: Tobacco Control Funding assets reflect the extent funding is available for tobacco control activities.

Community Asset	
1.1	Global per capita appropriation for tobacco control activities, from various sources, is consistent with the recommendations of the National Association of County and City Health Officials: ▪ < 100,000 population: $8-$10/capita ▪ 101,000-500,000 population: $6-$8/capita ▪ > 501,000 population: $4-$6/capita Subset of Global per capital funding for school programs: ▪ $4.00 to $6.00 per student regardless of student population size
1.2	Amount of MSA funds that are appropriated for the purpose of tobacco control activities
1.3	Amount of local Prop 10 funds that are appropriated for cessation and secondhand smoke education targeting pregnant women and families with young children

Communities of Excellence Assets *(continued)*

Social Capital Assets (2)
Definition: The Social Capital assets reflect the extent people and organizations work collaboratively in an atmosphere of trust to accomplish goals of mutual benefit.
Community Asset

2.1	Number of tobacco control advocacy trainings that are provided to youth and adults
2.2	Amount of satisfaction among coalition or advisory committee members with program planning, involvement of the community, implementation activities, quality of services, and progress made by the project
2.3	Amount of support by local key opinion leaders for tobacco related community norm change strategies
2.4	Amount of community activism among youth to support tobacco control efforts
2.5	Amount of community activism among adults to support tobacco control efforts
2.6	Number and type of non-traditional partners participating in coalitions or advisory committees facilitates tobacco control efforts

Cultural Diversity and Cultural Competency Assets (3)

Definition: Cultural Diversity and Cultural Competency assets are behaviors, attitudes, and policies among TCS-funded projects that enable effective work in cross-cultural situations within the community. Culture refers to patterns of human behavior that include the language, thoughts, communications, actions, customs, beliefs, values, and institutions of racial, ethnic, religious, sexual orientation, or social groups. Competence implies having the capacity to function effectively as an individual or organization within the context of the cultural beliefs, behaviors, and needs presented by consumers and the community.

Community Asset

3.1	Number and diversity (i.e., ethnic, cultural, sexual orientation) of partners participating in coalition or advisory committee is relative to their proportion in the community
3.2	**Retired. Asset 3.6 added in place of this asset to encourage a broad array of organizations to assist with ensuring that a diverse group of agencies are funded to address tobacco use.** ~~Extent to which the LLA and other TCS-funded projects in the health jurisdiction include specific objectives in their workplans/scopes of work to address cultural or ethnic/minority community or populations in relation to the demographics of the community~~
3.3	Extent that the coalition or advisory committee by-laws and member agency mission statements promote cultural diversity and competency
3.4	Extent that educational and media materials used by the agency reflect the culture, ethnicity, sexual orientation, and languages of the communities served, relative to the demographics of the community
3.5	**Retired. Asset 3.7 added in place of this asset to encourage addressing diversity through a broad range of organizational practices and policies beyond having bilingual staff.** ~~Extent that bilingual staff, subcontractors and consultants are part of the LLA and TCS-funded projects in proportion to the demographics of the local health jurisdiction~~
3.6	Extent to which culturally and ethnically diverse organizations are funded to implement community norm change-focused tobacco control efforts in the community, in proportion to the demographics of the community
3.7	Extent to which a tobacco control program implements organizational policies and practices that promote and institutionalize the provision of culturally competent and linguistically appropriate services for diverse populations, including organizational values that articulate commitment to cultural competency, participatory collaborative planning, provision of community capacity building, translation policies, staff diversity, and formative research/surveillance within diverse communities

Section 4: Gathering Data – Researching the Trip

Key Points:
- Gathering data during your needs assessment is analogous to researching a trip.
- Quantitative data and qualitative data are both important to the CX needs assessment.
- Researching a community indicator involves collecting data on nine attributes of that indicator, whereas researching an asset involves collecting data on the asset itself.
- The research process involves gathering existing relevant data and bolstering or enhancing those data with local findings when possible.

Understanding, Using, and Finding Data for the CX Needs Assessment

Planning with data is a basic public health principle. The CX needs assessment process incorporates this principle and consists of two distinct activities: 1) researching available data (covered in this section of the Module) and 2) rating the indicators and assets based on your research (covered in the next section of this Module).

Types of Data

The needs assessment process is an exercise in balancing quantitative and qualitative data in order to arrive at a conclusion about certain tobacco control factors in a local community. Both are valuable and should be used to rate the indicators and assets and to make decisions. Quantitative data are specific numbers that are systematically derived through some method of counting (e.g., rate of illegal tobacco sales to youth, number of cigarette butts collected, or number of calls from your county to the California Smokers' Helpline).

Qualitative data are descriptive data objectively collected. Data may be gathered from interviews, focus groups, observations, or documents such as policy records, newspaper clippings, correspondence, etc. They include summarizing and identifying people's thoughts about their experiences, attitudes, and beliefs. Coalition and advisory committee member discussions are another valuable source of qualitative data. Through qualitative data, valuable insights are gained as to the cause of a problem or the context in which the problem exists rather than providing specific definitive answers.

Data Collection Expectations

The research component of the needs assessment involves gathering data relevant to each indicator and asset. It does not require that an agency go out and conduct new data collection. The research component relies on the agency staff researching, gathering, and coalescing data from existing data sources that are available through state reports, local evaluation reports, and Web sites. Some agencies augment their research by conducting key informant interviews or community forums. For example, staff or a coalition member may be charged with talking to the County Office of Education Tobacco Use Prevention Education (TUPE) Coordinator to clarify the availability of cessation services for high school

students or with interviewing the community's chief enforcement officer to find out the extent to which laws against tobacco sales to minors are being enforced. Additionally, gaps in data may be addressed through discussion and input from the coalition or advisory committee.

Overwhelming amounts of tobacco-related data are available, so it is important to only gather the data that will assist your project in making decisions. For the indicators, this means finding information about each of the nine attributes that contribute to the overall indicator score. See Table 2 for a list and description of each of the attributes. Researching assets is simpler than researching indicators. There are no individual attributes associated with the assets. Rather, you collect data on the asset itself.

In researching and collecting available data, you will quickly realize that there is only regional or statewide data available for some of the attributes listed. Avoid being paralyzed by the lack of local data. If regional or statewide public support data are available, do not reject the data as irrelevant. Write it down. Then use qualitative data from local program evaluations such as focus groups or your coalition or advisory committee members to supplement the regional or statewide data. This will allow you to make a case as to whether the community seems to be doing better or worse than the region or state as a whole.

Getting Organized

Being methodical and organized in the research phase of the CX needs assessment will save time and effort later in the process when the coalition actually rates the indicators and assets. The Supplemental Materials at the end of this section provide tools to help you get organized by tracking data sources and those data elements about which you need to do more research. These tools are as follows:

1. *Indicator Attribute Data Collection Checklist*: Use this checklist to summarize completed research for all the indicators being assessed.
2. *CX Indicator Data Collection Record*: For each indicator to be assessed, staple a copy of this completed form on the front of a file folder, record the data sources as you locate them, and keep all the documentation you collect in the file folder.
3. *CX Asset Data Collection Record*: For each asset to be assessed, staple a copy of this form on the front of a file folder, record the data sources as you locate them, and keep all the documentation you collect in the file folder.

Reviewing and Summarizing the Data

It is recommended that agency staff take primary responsibility for locating and coalescing data sources for the various indicators and assets; however, small teams of agency staff and community members should review the data for a few indicators or assets together. They should identify the major findings, and then summarize and record the findings in the comment section of the CX indicator and asset worksheets. Later, when the larger group reviews the worksheets to rate the indicators and assets, the comment section can be augmented with further discussion from the coalition or advisory committee.

Table 2
Description and Definition of Indicator Attributes

Indicator Attributes to be Assessed	Definition/Explanation
1. Public Awareness	Refers to the level of general knowledge the community has about the issue. While some issues have a high level of common knowledge, such as the dangers of secondhand smoke, public awareness about other issues can vary greatly within a community based on cultural or educational factors.
2. Public Support	Refers to the degree to which the community holds attitudes and beliefs that support efforts to address the issue (i.e., the amount of backing within a community for the issue). The degree of public support is a key element in determining a community's readiness to tackle a policy initiative.
3. Media Attention	Refers to how much and how often an issue has been covered in the local or state press (e.g., newspapers, TV, radio, etc.)
4. Education/ Awareness Campaign	Refers to efforts in the community either by the agency conducting the needs assessment or by other projects serving the community that have conducted educational activities to increase awareness and knowledge about the issue. May include using presentations, outreach visits, trainings, Web sites, public relation events, or educational materials dissemination.
5. Media Campaign	Refers to paid or public service announcement (PSA) advertising campaigns either funded by the agency conducting the needs assessment, other projects serving the community, or the state media campaign (e.g., ads placed on billboards, newspapers, magazines, TV, radio, transit, etc.). Does not include public relations activities.
6. Voluntary Policy	Refers to policies that are not mandated by law, but instead reflect action taken by businesses, housing complexes, venues, and other entities that address their business practices or property. Voluntary policies are often the precursor to establishing permanent community change, such as no-smoking apartment complex policies, but rely heavily on public pressure, and customer and employer cooperation to maintain compliance.
7. Legislated Policy	Refers to policies passed into law by a government or board authorized to set formal rules, such as a city, county, state, tribe, fair board, transit authority, or housing authority. Legislated policies create sustainable community change and build consensus through a process that mobilizes individuals and groups, often in an unprecedented way.
8. Active Enforcement	Refers to the amount of activity conducted to promote adherence to a policy. Activities may include conducting monitoring and surveillance, sting operations, responding to complaints, and the imposition of sanctions or penalties for non-compliance. A policy's strength is highly dependent on the consistency and quality of enforcement efforts. Some policies, such as no-tobacco-sales-to-minors laws, where non-compliance is not highly visible to the community, require more official enforcement effort to create a deterrent effect; highly visible non-compliance with policy, such as with no-smoking restrictions, requires less enforcement effort.
9. Compliance	Refers to the level of observance of existing policies, either voluntary or legislated. Compliance is generally dependent on those impacted by the policy, such as citizens, employees, or customers adhering to smoking restrictions on beaches or store clerks not selling tobacco to minors.

Travel Research: Where to Find Data

CDHS/TCS does not expect agencies to collect a lot of new data in order to complete the CX needs assessment. Rather, CDHS/TCS expects an agency to thoroughly research the readily available data sources and use the relevant data in discussions with advisory group/coalition members. The Web sites described in Table 3 provide sources of data for use in the CX needs assessment.

Tips about working with data

1. Create a separate file folder for each indicator and asset that you are assessing and file copies of the data, including the source and year of the data.

2. For each indicator create a checklist of the nine attributes that contribute to the overall indicator score and keep track of whether you have located data for each of the attributes. File this checklist in the indicator file.

3. Create a plan for conducting the research that identifies the data needed, who is responsible for finding the data, a timeline for collecting the data, possible sources of the data, including supplementary qualitative data collection, and who is responsible for recording key findings into the comment section of the indicator or asset worksheet.

4. Only gather data that is relevant to the needs assessment.

5. Use all of the CDHS/TCS resources available to you, such as C-STATS, TECC, other statewide contractor Web sites, the OTIS electronic project directory, and your coalition members.

6. Review the data prior to presenting it to your coalition or advisory committee and identify any major gaps that you especially need to discus with the coalition.

7. Record key data findings in the comment section of the CX indicator and asset worksheets to support your ratings.

Table 3
Tobacco Control-Related Web sites with Data Helpful to CX Needs Assessment

Web Site Name/ Address/Public or Password Protected	Web Site Description	Major Web Site Content
Tobacco Control Section Web sites		
C-STATS (County and Statewide Archive of Tobacco Statistics) http://webtecc.etr.org/cstats/ Public with Password Protected Areas	This Web site is a one-stop site for a variety of data sources and is especially geared toward providing information about CX indicators and assets. This Web site provides access to a wide variety of data resources, including comparison of local and statewide data, publications, and links to other sites.	• Under Resources for Funded Projects is a helpful document called How to Find Data for CX Indicators on C-STATS • Tobacco use prevalence for youth and adults • Secondhand smoke exposure • Number of calls to the California Smokers' Helpline • Public attitudes/support for various policies • Tobacco sponsorship, awareness • Exposure to tobacco ads • Tobacco control policies by community • Funding for tobacco control
California Department of Health Services, Tobacco Control Section www.dhs.ca.gov/tobacco Public	This Web site describes the mission of CDHS/TCS, provides a source of publications, press releases, requests for application, and a summary of major tobacco-related legislation in California.	• Scientific evaluation reports • News releases • Requests for Application • Public Project Directory Search • Public Local Program Evaluator Search
CODE Report http://webtecc.etr.org/code/ Password Protected	This Web-based data management system collects information about inspections and citations issued relevant to several state tobacco control laws that are locally enforced. The Web site was developed at a time when TCS had the ability to fund 13 law enforcement agencies to conduct enforcement of tobacco-related laws. (This funding was subsequently lost as a result of a state budget deficit.) Presently, this Web site continues to be used by law enforcement agencies on a voluntary basis.	• Data on enforcement actions for a variety of tobacco control laws.

Table 3 *(continued)*

Web site Name/ Address/Public or Password Protected	Web site Description	Major Web site Content
Tobacco Control Section Web sites		
OTIS (Online Tobacco Information System) http://tcsotis.org Password Protected	This Web site is accessible only to CDHS/TCS contractors. It provides access to each contractor's scope of work. It includes a searchable project directory that provides detailed information about CDHS/ TCS funded projects working in a specific community, on specific indicators/assets, or with various target populations. Additionally, access to other CDHS/TCS Web sites is available.	• Access to searchable electronic project directory • Access to CDHS/TCS funded agency objectives, target populations, educational materials to be developed, etc. • Access to statewide reports summarizing tobacco efforts throughout California • Access to other CDHS/TCS Web sites
PARTNERS www.tcspartners.org Password Protected	PARTNERS is an electronic communication system that links TCS and 650 subscribers who are primarily CDHS/TCS contractors and members of major tobacco control constituency groups. The Web site includes an electronic TCS newsletter, a strategy exchange, approximately 15 topical conference rooms, the ability to upload and download documents, links to rosters, manuals, calendar, observation forms, online forms, and administrative utilities to change passwords, update profiles, and register new users.	• TCS Update Newsletter • TCS Calendar • Special Topic Pages • Strategy Exchange • Forms • Access to other tobacco control Web sites
Smoke-free California: Where We Live, Work and Play www.smokefreeca.org/ index.cfm? Password Protected	This Web site serves as the primary informational resource for secondhand smoke information, such as current science/research, educational materials, policies, media, sample workplans, enforcement models, and documents to counter the tobacco industry's claims.	• Searchable by CX secondhand smoke indicators • Secondhand smoke research • News on secondhand smoke policies and research • Publications • Advocacy tools

Table 3 (continued)

Web site Name/ Address/Public or Password Protected	Web site Description	Major Web site Content
Tobacco Control Section Web sites		
STORE http://www.tecc.org/store/index.html Password Protected	This Web site supports implementation of the STORE Campaign by CDHS/TCS contractors. The STORE Campaign is aimed at the retail sale and marketing of tobacco products. It seeks to decrease the availability of tobacco, illegal tobacco sales, and marketing practices that reinforce tobacco use as a social norm or that undermine cessation efforts by tobacco users.	• Data on statewide rates of illegal tobacco sales to minors • Case studies • Campaign advocacy tools • News items
Alphabetical List of Non-TCS Web sites		
Altria (aka Philip Morris) www.altria.com Public	Corporate Web site for Altria, the umbrella organization for Philip Morris and Kraft foods. Click on "Responsibility" and then "Contributions and Communities" to obtain a list of community groups that received grants from Altria.	• List of Hunger, AIDS, Arts, Humanitarian, Domestic Violence, and Environmental organizations that have received donations
American Lung Association of California www.californialung.org http://www.californialung.org/thecenter/getlocal/documents/2005TobaccoIndustryContributionReport.pdf Public	This Web site provides access to The Center for Tobacco Policy and Organizing, a statewide technical assistance project funded by CDHS/TCS. It also provides access to American Lung Association of California state and national publications, advocacy materials, and smoking cessation tools.	• Provides lists of tobacco industry campaign contributions to elected officials in California • Provides access to Online *Freedom from Smoking Online Cessation* Program

Table 3 *(continued)*

Web site Name/ Address/ Public or Password Protected	Web site Description	Major Web site Content
Alphabetical List of Non-TCS Web sites		
Americans for Nonsmokers' Rights (ANR) http://www.no-smoke.org/ Public	This Web site supports the efforts of ANR, which seeks to protect non-smokers from exposure to secondhand smoke.	• Smoke-free lists and maps • Fact sheets • Advocacy tools
Big Tobacco Sucks www.bigtobaccosucks.org Public	Provides information on top tobacco industry and affiliated businesses, their offenses, global expansion and ways to fight big tobacco.	• Tobacco industry news • Big tobacco exposés • Information on global expansion by the tobacco industry • Information on how to get involved
Buck Tobacco www.bucktobacco.org Public	This Web site provides tools and information on how to facilitate enactment of policies restricting tobacco sponsorship of rodeos.	• Provides list of tobacco control related rodeo policies in California
CYAN (California Youth Advocacy Network) www.cyanonline.org Public (hint search for "Policy")	This Web site supports the efforts of CYAN, which is dedicated to supporting youth and young adults by advocating for a tobacco-free California. The Web site provides tobacco control professionals and young people with the tangible tools for action to mobilize a powerful statewide movement.	• List of college campus smoking policies • List of college campus tobacco sales policies • List of college campus tobacco sponsorship policies • Advocacy tools for working with teens and young adults
California Office of the Attorney General http://caag.state.ca.us/ Public	This Web site provides access to efforts of the Tobacco Litigation and Enforcement Section of the California Attorney General's Office. This Section is involved with enforcing provisions of the Master Settlement Agreement and some state tobacco control laws through litigation and enforcement actions.	• Describes provisions of the Master Settlement Agreement with Cigarette and Smokeless Tobacco Manufacturers • Provides a list of cigarette and roll your own tobacco brands certified for sale in California. • Lists highlights of enforcement actions.

Table 3 (continued)

Web site Name/ Address/ Public or Password Protected	Web site Description	Major Web site Content
Alphabetical List of Non-TCS Web sites		
Centers for Disease Control (CDC) Tobacco Information and Prevention Source http://www.cdc.gov/tobacco/ Public	This CDC Web site provides information to professional and consumer audiences. It provides access to research, smoking cessation quit tools, fact sheets, and information about federal tobacco control campaigns.	• New tobacco control research citations • Surgeon General reports • Educational materials • Fact sheets • CDC sports initiative campaign materials
CDC Global Tobacco Web site www.cdc.gov/tobacco/global/ Public	This Web site supports the CDC's work to address tobacco use globally.	• Information on the Framework Convention for Tobacco Control • Country-specific data reports • Information on World No Tobacco Day
Cessation Resource Center http://apps.nccd.cdc.gov/crc Public	This Web site supports the work of the Center for Tobacco Cessation, which serves as a source of the best available science on tobacco cessation and works with national partners to expand the use of effective tobacco dependence treatments.	• Clinical and community cessation guidelines • Cessation research summaries • Summary of basic tobacco control data for each state in the United States (U.S.) • Cessation policy briefs • Cessation tool kits for employers, health care providers, insurers • Resources for tobacco cessation certification programs
Cigarette Litter http://www.cigarettelitter.org/index.asp?PageName=Home Public	This Web site supports the work of an informal, non-profit organization dedicated to dramatically reducing cigarette litter across the U.S. Their goal is to accomplish this task by raising public awareness of the issue and educating communities about the facts regarding cigarette litter.	• Provides educational and factual information about the dangers of cigarette butt litter • Provides advocacy tools

Table 3 *(continued)*

Web site Name/ Address/ Public or Password Protected	Web site Description	Major Web site Content
Alphabetical List of Non-TCS Web sites		
Common Cause www.commoncause.org http://tobaccofreeaction.org/contributions/september2005/september2005.pdf Public	Nonpartisan nonprofit advocacy organization Web site whose purpose is to promote citizen involvement in the political process and to hold their elected leaders accountable to the public interest.	• Provides information on tobacco industry campaign contributions to Congressional California elected officials
Community Tool Box http://ctb.ku.edu/index.jsp Public	The Tool Box provides over 6,000 pages of practical information to support work in promoting community health and development. The Web site was created and is maintained by the Work Group on Health Promotion and Community Development at the University of Kansas.	• Provides community planning and organizing tools
Healthy Kids Survey by county and school district at www.wested.org/pub/docs/chks_home.html Public	Provides information on the California Healthy Kids Survey, which is a comprehensive school health survey conducted in California. There is a charge to receive reports and data sets. TCS recommends working through local school districts or County Offices of Education as they already have copies of the reports.	• Provides California Healthy Kids Survey Instrument and information on ordering survey reports

Health Resources and Services Administration (HRSA)
 	
http://www.hrsa.gov/culturalcompetence/indicators/
 	
Public
	HRSA sponsored a project to develop indicators of cultural competence in health care delivery organizations. This Web site provides access to information on the assessment profile developed, the technical experts and key informants involved in the project.	• Cultural competence profile
		  • Organizational values
		  • Governance
		  • Planning/monitoring/evaluation
		  • Communication
		  • Staff development
		  • Organizational infrastructure
		  • Services/interventions
		• List of intermediate outcome indicators

Table 3 (continued)

Web site Name/ Address/ Public or Password Protected	Web site Description	Major Web site Content
Alphabetical List of Non-TCS Web sites		
Keep America Beautiful Campaign http://www.kab.org/programs.asp?id=51&rid=76 Public	This Web site provides education and advocacy tools to address a variety of litter and graffiti issues.	• Provides factual information on the leading causes of litter in the U.S. • Provides educational tools
National Institute of Drug Abuse (NIDA) http://www.smoking.drugabuse.gov/ Public	This Web site provides summaries of recent research about nicotine addiction.	• Nicotine addiction research reports • Fact sheets • Press releases about nicotine and smoking research
National Center for Cultural Competency (NCCC) http://www11.georgetown.edu/research/gucchd/nccc/ Public	This Web site seeks to increase the capacity of health and mental health programs to design, implement, and evaluate culturally and linguistically competent service delivery systems.	• Provides definitions of cultural and linguistic competency and how these relate to organizational practices • Online training program • Promising practices • Health care worker cultural competence assessment tool • Consultant pool searchable directory
Office of Minority Health http://www.omhrc.gov/templates/browse.aspx?lvl=2&lvlID=15 Public	This Web site provides a list of standards for culturally and linguistically appropriate services in health care and a report that discusses how the standards were created.	• List of national organizational cultural competency standards
Prescription for Change http://www.calmedfoundation.org/rxchange/campaign/campaign1.html Public	This Web site was created for a statewide campaign seeking to eradicate the sale of tobacco from pharmacies. While the campaign no longer exists statewide, the site provides educational information and a registry of tobacco free pharmacies.	• Registry of tobacco free pharmacies

Table 3 *(continued)*

Web site Name/ Address/ Public or Password Protected	Web site Description	Major Web site Content
Alphabetical List of Non-TCS Web sites		
Research and Training Center on Family Support and Mental Health, Portland State University http://www.rtc.pdx.edu/pgFPF02TOC.php Public	The Fall 2002 issue of the electronic newsletter *Focal Point* on this Web site offers a variety of resources on cultural competency.	• Achieving cultural competence through organizational self-assessment • Measuring client perspectives on cultural competence • A community responds: On the way toward cultural competence • Working toward cultural competence through family involvement
Safe and Healthy Kids Annual Report http://hk.duerrevaluation.com/ Public	This Web site is a product of the California Department of Education. It provides the annual report of county offices of education, school districts, and charter schools that are required to complete the Alcohol, Tobacco, Other Drug, Violence, and Health Promotion Programs Annual Report. The Web site provides a searchable Web site by county and school district.	• Provides data on the tobacco use curricula, cessation, teacher training, etc. • **Question 5**: Performance indicators used to identify goals - tobacco-specific indicators • **Question 8**: Provide the best estimate of how many students, in all grades, received classroom-based tobacco use prevention instruction • **Question 9**: Curricula Resources List • **Question 10**: The number of students who have been specifically identified as tobacco users, along with the number of these tobacco-using students who were served with special, targeted cessation, and/or intervention services • **Question 11**: Predominant nonclassroom-based prevention activities • **Question 12**: The number of classified and certificated staff served by staff-focused alcohol, tobacco, other drug and violence in-services during the previous year • **Question 13**: Tobacco prevention/intervention program targeting parenting or pregnant minors

Table 3 (continued)

Web site Name/ Address/ Public or Password Protected	Web site Description	Major Web site Content
Alphabetical List of Non-TCS Web sites		
Smokefree Apartment House Registry www. smokefreeapartments.org Public	This Web site provides a searchable database of smoke-free housing in counties in Southern and Northern California and hotels in the U.S. and internationally.	• List of smoke-free apartments • List of smoke-free hotels • List of smoke-free senior housing • Advocacy and legal tools
Smoke-Free Housing www. smokefreehousing.org Public	This Web site provides a searchable database of smoke-free apartments in Northern California, primarily Shasta, Butte, and Tehama counties.	• Smoke-free apartment database for Northern California • Sample policy • Educational information
Smoke Free Movies http://www. smokefreemovies.ucsf.edu/ Public	This Web site supports the Smoke Free Movies Project, which seeks to sharply reduce the U.S. film industry's usefulness to the tobacco industry in marketing tobacco products domestically and globally.	• Provides data on smoking in the movies • Provides a policy platform • Provides educational and advocacy tools for the community and parents
Smoking Cessation Leadership Center (SCLC) http://smokingcessation leadership.ucsf.edu/ Public	The SCLC is a national program that aims to increase smoking cessation rates and increase the number of health professionals who help smokers quit. SCLC creates partnerships with a variety of groups and institutions to develop and implement plans around smoking cessation. They have partnerships with dental hygienists, nurses, pharmacists, emergency physicians, hospitals, labor unions, family physicians, the Veterans Health Administration, and others.	• PowerPoint presentation on smoking and mental health patients • Resources for health professionals • Fact sheets for smokers

Table 3 *(continued)*

Web site Name/ Address/ Public or Password Protected	Web site Description	Major Web site Content
Alphabetical List of Non-TCS Web sites		
State Legislated Actions on Tobacco Issues (SLATI) http://slati.lungusa.org/ Public	This Web site of the national American Lung Association covers a wide range of topics related to the issues of tobacco control, including public smoking policy and smoking laws, advertising restrictions and licensing requirements, and the guide to State Legislated Actions on Tobacco Issues (SLATI).	• Summaries of state tobacco control laws for each state in the U.S. • Grades for each state on smoke-free air, youth access, tobacco control and prevention spending, and tobacco taxes • Online Freedom to Smoking cessation program • Fact sheets
STORE Alert http://www.storealert.org/default_flash.asp Public	This Web site was originally created with funding from the National Cancer Institute to Battelle Memorial Institute. It is now maintained by Campaign for Tobacco Free Kids.	• Provides educational and advocacy materials on how to address retail tobacco advertising • Provides retail ad survey tool and protocol
TALC (Tobacco Assistance Legal Center) www.phi.org/talc/ Public	This Web site supports the efforts of TALC, which provides California communities with free technical assistance on tobacco control policy issues. The Web site provides tobacco policy and legal assistance tools.	• Lists of communities with various tobacco control policies • Publications • Model policies
Thumbs Up! Thumbs Down! At http://www.sacbreathe.org/ Public	This Web site supports the efforts of a tobacco control project designed to track tobacco use in the movies and raise awareness about the problem.	• Provides reports on tobacco use in the movies and information on how to get involved in campaign activities
Tobacco-Free Kids www.tobaccofreekids.org Public	National Web site supporting the work of the Campaign for Tobacco-Free Kids. Wide variety of information about the Master Settlement Agreement, tobacco taxes, tobacco industry marketing tactics, federal tobacco control initiatives, and state-specific tobacco control initiatives.	• Provides a list of campaign contributions to California U.S. Senators and House of Representatives members for the period 1997 to 2006 • Provides numerous research reports and advocacy materials

Table 3 *(continued)*

Web site Name/ Address/ Public or Password Protected	Web site Description	Major Web site Content
Alphabetical List of Non-TCS Web sites		
Tobacco.org http://www.tobacco.org/ Public	This Web site provides a searchable tobacco news database. It is presently free, but in the future a subscription will be required. It features tobacco news, assistance for smokers trying to quit, and action alerts.	• Identify tobacco related news stories for your community
UCSF Tobacco Control Archives www.library.ucsf. edu/tobacco/ Public	Tobacco control archive of papers, unpublished documents, and electronic resources relevant to tobacco control issues.	• Tobacco industry documents • Tobacco control documents • Research and scholarly documents
World Health Organization www.who.int/en/ Public	This Web site supports the World Health Organization's efforts across a variety of health issues.	• Information on the Framework Convention for Tobacco Control • Provides access to regional Web sites that include fact sheets, policy documents and publications

CDHS/TCS Publications and Reports

The following reports provide tobacco use prevalence, knowledge, attitude, and belief data. They are available at www.dhs.ca.gov/tobacco.

- *2004 California Student Tobacco Survey Report*
- *2004 California Asian Indian Tobacco Use Survey Report*
- *2004 California Chinese American Tobacco Use Survey Report*
- *2004 California Korean American Tobacco Use Survey Report*
- *2004 California Active Duty Military Tobacco Use Survey Report*
- *2004 California Lesbians, Gays, Bisexuals, and Transgender Tobacco Use Survey Report*
- *2004 Current Practices in Enforcement of California Laws Regarding Youth Access*

- *to Tobacco Products and Exposure to Secondhand Smoke*
- *2003 Tobacco Control Successes in California: A Focus on Young People, Results from the California Tobacco Surveys, 1990-2002*
- *1999 The Cost of Smoking in California*

Local and Other Data Sources

Local agencies funded by CDHS/TCS to conduct tobacco control programs such as health departments and community based organizations conduct surveys, and prepare evaluation reports that may be useful to your needs assessment activities. Be sure to contact these agencies directly to find out if they have data on rates of illegal tobacco sales to youth, tobacco litter, and

compliance with clean indoor air laws, etc. CDHS/TCS funded agencies may access information about locally funded tobacco control projects by searching the CDHS/TCS electronic project directory available at www.tcsotis.org. Additionally, CDHS/TCS funded projects may request assistance from the reference librarian at the Tobacco Education Clearinghouse of California for assistance to identify local program evaluation reports and other relevant data sources by calling (800) 258-9090.

Research tip: Whether it is C-STATS or any other Web site, use navigational tools such as the Site Map, the Help page, and "Resources." Very often, Web sites contain quite a bit of useful information that may be a challenge to find. For example, on the C-STATS Web site, click the Resources button on the Home page, then click "Resources for Funded Projects," which is password protected (Contact CDHS/TCS if you need a password). On the "Resources for Funded Projects" page is a helpful document called "How to Find Data for CX Indicators on C-STATS."

Section 4
Supplemental Materials

Indicator Attribute Data Collection Checklist: Use to summarize completion of data collection efforts for all indicators being assessed.

CX Indicator Data Collection Record: For each indicator to be assessed, staple a copy of this completed form on the front of a file folder, record the data sources as you locate them, and keep all the documentation you collect in the file folder.

CX Asset Data Collection Record: For each asset to be assed, staple a copy of this form on the front of a file folder, record the data sources as you locate them, and keep all the documentation you collect in the file folder.

Use this checklist to keep track of each indicator and the data collected for each attribute related to that indicator. State the indicator name and number. To help you keep organized and keep track of data you have found or data gaps you need to fill, check-off (✓) the attribute as you find data.

Indicator Attribute Data Collection Checklist

Indicator # and Name	Public Awareness	Public Support	Media Attention	Education/ Awareness Campaign	Media Campaign	Voluntary Policy	Legislated Policy	Enforcement	Compliance

Use this form to track who collected data for a specific indicator, the source of that data, and the time frame the data is from. Staple a copy of this data record to the front of a file folder and keep all hard copies of data sources (e.g., reports, interview summaries, etc.) together.

CX Indicator Data Collection Record

Indicator number and subject matter: _____

Name of researcher: _____ Phone: _____

Data collection time frame: _____

Attribute	Data Source(s) and Year(s) Data is From
Public Awareness Refers to the level of general knowledge the community has about the issue. While some issues have a high level of common knowledge, such as the dangers of secondhand smoke, public awareness about other issues can vary greatly within a community based on cultural or educational factors.	
Public Support Refers to the degree to which the community holds attitudes and beliefs that support efforts to address the issue (i.e., the amount of backing within a community for the issue). The degree of public support is a key element in determining a community's readiness to tackle a policy initiative.	
Media Attention Refers to how much and how often an issue has been covered in the local or state press (e.g., newspapers, TV, radio, etc.).	
Education/Awareness Campaign Refers to efforts in the community either by the agency conducting the needs assessment or by other projects serving the community that have conducted educational activities to increase awareness and knowledge about the issue. May include using presentations, outreach visits, trainings, Web sites, public relations events, or educational materials dissemination.	

CX Indicator Data Collection Record *(continued)*

Attribute	Data Source(s) and Year Data is From
Media Campaign Refers to paid or public service announcement (PSA) advertising campaigns either funded by the agency conducting the needs assessment, other projects serving the community, or the State media campaign (e.g., ads placed on billboards, newspapers, magazines, TV, radio, transit, etc.). Does not include public relations activities.	
Voluntary Policy Refers to policies that are not mandated by law, but instead reflect action taken by businesses, housing complexes, venues, and other entities that address their business practices or property. Voluntary policies are often the precursor to establishing permanent community change, such as no-smoking apartment complex policies, but rely heavily on public pressure, and customer and employer cooperation to maintain compliance.	
Legislated Policy Refers to policies passed into law by a government or board authorized to set formal rules, such as a city, county, state, tribe, fairboard, transit authority, or housing authority. Legislated policies create sustainable community change and build consensus through a process that mobilizes individuals and groups, often in an unprecedented way.	

CX Indicator Data Collection Record *(continued)*

Attribute	Data Source(s) and Year Data is From
Active Enforcement Refers to the amount of activity conducted to promote adherence to a policy. Activities may include conducting monitoring and surveillance, sting operations, responding to complaints, and the imposition of sanctions or penalties for non-compliance. A policy's strength is highly dependent on the consistency and quality of enforcement efforts. Some policies, such as "no tobacco sales to minors" laws, where non-compliance is not highly visible to the community, require more official enforcement effort to create a deterrent effect; highly visible non-compliance with policy, such as with no-smoking restrictions, requires less enforcement effort.	
Compliance Refers to the level of observance of existing policies, either voluntary or legislated. Compliance is generally dependent on those impacted by the policy, such as citizens adhering to smoking restrictions on beaches or store clerks not selling tobacco to minors.	

Use this form to track who collected data for a specific asset, the source of that data, and the time frame the data is from. Staple a copy of this data record to the front of a file folder and keep all hard copies of data sources, e.g., reports, interview summaries, etc., together.

CX Asset Data Collection Record

Asset number and subject matter: _____

Name of researcher: _____ Phone: _____

Data collection time frame: _____

Data Source(s) and Year Data are from:

_____

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Section 5: Rating Community Indicators and Community Assets Rating Your Potential Stops Along the Way

Key Points:
- Rating indicators and assets is analogous to rating hotels, restaurants, museums, and tourist sites while planning a trip itinerary.
- Rating an indicator involves analyzing data for each of nine attributes, rating each attribute, and using the attributes' ratings to reach consensus on an overall rating for the indicator.
- Rating an asset involves analyzing the data about the asset and arriving at a consensus rating for the asset.

The previous section discussed the process of gathering data. This section explains how to rate the indicators and assets and how to complete the CX indicator and asset rating worksheets. You will first complete your worksheets with your coalition or advisory committee and then input this information into the CDHS/TCS Online Tobacco Information System (OTIS). OTIS is the Web-based data system CDHS/TCS uses for tobacco control plans and budgets.

Examples of completed indicator rating worksheets are provided at the end of this section. One example reflects a completed worksheet and the other depicts the data entry form completed in the OTIS. The rating process involves the use of several worksheets and tools, all of which are located in the Supplemental Materials of this section.

CX Worksheets and Tools Located in Supplemental Materials
- CX Indicator Rating Worksheet Instructions
- CX Indicator Rating Worksheet
- CX Indicator-Attribute Rating Guide
- CX Asset Rating Worksheet Instructions
- CX Asset Rating Worksheet
- CX Asset Rating Guide

Pre-meeting Planning: People, Paper, and Information
Rating the indicators and assets occurs in one or more meetings.

People
Who to invite to the meeting:
- The people who did the research on the indicators and assets and who summarized key findings onto the comment sections of the CX indicator and asset worksheets. If possible, plan to have the person who actually did the research on a given indicator or asset be responsible for presenting the data that he or she collected.
- Everyone who will participate in the rating process.
- A facilitator to lead the discussion.
- A designated recorder or secretary to capture the group's comments and ratings.

Paper and Information:

The rating guides and worksheets are found in the Supplemental Materials of this section.

Documentation and worksheets to bring to the meeting:
- List of the indicators and assets the group will rate
- Indicator-Attribute Rating Guide
  - * Enough copies for every person at the meeting
- Indicator Rating Worksheet
  - * Recommend that a small team of staff and community members be assigned to review data identified by agency staff and record key data findings into the comment sections of worksheets prior to the actual rating process
  - * Enough copies for every person at the meeting
- File folder of data collected about each indicator's attributes
- Asset Rating Guide
  - * Enough copies for every person at the meeting
- Asset Rating Worksheet
  - * Recommend that a small team of staff and community members be assigned to review data coalesced by staff and record key data findings into the comment sections of worksheets prior to the actual rating process
  - * Enough copies for every person at the meeting
- File folder of data collected about each asset

> **Tip**: Make transparencies of the Indicator Rating Worksheet and Asset Rating Worksheet, and work with these forms on an overhead projector so that the entire group can fill out one copy together. If you decide to do this, also assign a secretary or recorder to copy the information from the transparency onto a paper version of the worksheet for later use.

How to Rate Indicators

To begin rating the indicators, assemble the following materials:
- White board or flipchart
- Overhead projector with transparencies (optional)
- List of the indicators the group will rate
- Indicator-Attribute Rating Guide (enough copies for every person at the meeting)
- File folder of data collected about each indicator's attributes
- Indicator Rating Worksheet (Recommend that key data findings be summarized on the worksheets prior to the group discussing and rating the indicators. Augment these comments with information provided by coalition or advisory committee members.)

For each indicator, there are two parts to the rating process: first, each of the nine attributes is rated, and second, the attributes' ratings are used to arrive at an overall rating for each indicator.

How to Rate the Attributes for Each Indicator

1. Prepare to discuss the first attribute. Use your "CX Indicator Rating Worksheet" transparency or use a blank hard copy of the CX Indicator Rating Worksheet.
2. Share with the group the relevant data pertaining to the first attribute, which is "public awareness."
3. Using the Indicator-Attribute Rating Guide, discuss the conclusions that can be drawn about public awareness of this indicator.
4. Reach a group consensus on the rating that public awareness of this indicator should receive. The rating scale ranges from 0 to 4.

5. Go on to the next attribute, "public support." Repeat steps 1 through 4 above.

6. Continue in the same manner until you have rated all nine attributes for the first indicator. Then, rate the indicator as described below.

Overall Indicator Rating

1. As a group, arrive at an overall impression of this indicator. Looking at the ratings of the attributes, does it appear to be a compelling need in the target community?

2. Reach a group consensus on a rating for this indicator. The Overall Indicator Rating scale ranges from 0 to 4.

3. Important: This score is NOT a mathematical average of the attributes' ratings. The group may feel that some attributes deserve greater weight than others, for example. Assign a number from 0 (none) to 4 (excellent). The greater the need, the lower the rating—0 means "huge need."

4. Record supporting comments. Comments are important—explain how the data about the attributes supports the group's rating of the indicator.

5. Congratulations! You have just analyzed your first community indicator! Did you identify a need in your target community?

6. Repeat the process for each of the indicators: rate each attribute, then using the attributes' ratings, arrive at a consensus score for each indicator.

How to Rate Assets

To begin rating the assets, assemble the following materials:

- White board or flipchart
- Overhead projector with transparencies (optional)
- List of assets to be rated
- Asset Rating Guide (enough copies for every person at the meeting)
- Data collected about each asset
- Asset Rating Worksheet (It is recommended that key data findings be summarized on the worksheets prior to the group discussing and rating the assets. Augment these comments with information provided by coalition or advisory committee members.)

For each asset, do the following:

1. Prepare to discuss the first asset—use your "Asset Rating Worksheet" transparency or get a blank hard copy of the Asset Rating Worksheet.

2. Share with the group the relevant data pertaining to the first asset.

3. Using the Asset Rating Guide, discuss the conclusions that can be drawn about the first asset.

4. Reach a group consensus on the rating for this asset. The rating scale ranges from 0 to 4 or D/K (Don't Know).

5. Record this rating AND supporting comments.

6. Repeat the process for the other assets you are rating.

Points to Remember

- Avoid "analysis paralysis." It is very likely that gaps in the data will exist. For some indicators and assets, a relatively subjective conclusion will have to be drawn.

- Each indicator's rating is a judgment call based on the collective wisdom of the group, NOT a mathematical average of the attributes' scores.

- Arriving at a final rating for an indicator or an asset is most often a subjective process; it is a balance of quantitative data (hard numbers) and qualitative data (opinions and impressions).

- For indicators and assets, the lower the rating, the greater the need.

- Comment, comment, comment—explain how the group arrived at the rating.

EXAMPLE
CX Indicator Rating Worksheet

Indicator Number: __1.1.6__ Core Indicator? Yes __X__ No ____

Indicator Title: __TI Sponsorship of cultural & sporting events__

Community Area Assessed: __City and County of San Francisco__

Date(s) Assessment Conducted: __October 25, 2005__

Data Collection Timeframe: __2002 - 2005__

Note: *Comments are required for each attribute and the overall rating.*

Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4	Insufficient Data (ID)	Not Applicable (N/A)
1. **Public Awareness** Refers to the level of general knowledge the community has about the issue. While some issues have a high level of common knowledge, such as the dangers of secondhand smoke, public awareness about other issues can vary greatly within a community based on cultural or educational factors.						✓	
Comments: No public awareness campaign was implemented and no data was collected re: public awareness of issue.							

CX Indicator Rating Worksheet Example (continued)

Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4	Insufficient Data (ID)	Not Applicable (N/A)
2. **Public Support** Refers to the degree to which the community holds attitudes and beliefs that support efforts to address the issue (i.e., the amount of backing within a community for the issue). The degree of public support is a key element in determining a community's readiness to tackle a policy initiative.				✓			
Comments: 2002 CTS reported that 65% of adults surveyed think sponsorship of sporting and cultural events should be banned.							
3. **Media Attention** Refers to how much and how often an issue has been covered in the local or state press (e.g., newspapers, TV, radio, etc.).	✓						
Comments: No media coverage during assessment period that we know of.							
4. **Education/Awareness Campaign** Refers to efforts in the community either by the agency conducting the needs assessment or by other projects serving the community that have conducted educational activities to increase awareness and knowledge about the issue. May include using presentations, outreach visits, training, Web sites, public relations events, or educational materials dissemination.	✓						
Comments: No education/awareness campaign conducted.							

CX Indicator Rating Worksheet Example (continued)

	Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4	Insufficient Data (ID)	Not Applicable (N/A)
5.	**Media Campaign** Refers to paid or public service announcement (PSA) advertising campaigns either funded by the agency conducting the needs assessment, other projects serving the community, or the state media campaign (e.g., ads placed on billboards, newspapers, magazines, TV, radio, transit, etc.). Does not include public relations activities. **Comments:** No media campaign conducted.	✓						
6.	**Voluntary Policy** Refers to policies that are not mandated by law, but instead reflect action taken by businesses, housing complexes, venues, and other entities that address their business practices or property. Voluntary policies are often the precursor to establishing permanent community change, such as no-smoking apartment complex policies, but rely heavily on public pressure, and customer and employer cooperation to maintain compliance. **Comments:** MEChA, the local agency that organized Cinco de Mayo, Carnaval, and Sept 16th festivals in SF adopted a voluntary policy not to accept tobacco sponsorship many years ago. Gay Pride Parade also adopted a no tobacco sponsorship policy. According to the TIME project, a number of events (rodeos, dance companies, theater productions, and museums) have been sponsored by tobacco companies. The TFP provides sponsorship to organizations that do not accept tobacco and/or tobacco food subsidiary company sponsorship or donations. The Asian American Film Festival was approached and declined to adopt a policy. As part of its sponsorship support, the TFP requires that the current event not be sponsored by tobacco companies, but does not require an organizational policy.		✓					

CX Indicator Rating Worksheet Example (continued)

	Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4	Insufficient Data (ID)	Not Applicable (N/A)
7.	**Legislated Policy** Refers to policies passed into law by a government or board authorized to set formal rules, such as a city, county, state, tribe, fairboard, transit authority, or housing authority. Legislated policies create sustainable community change and build consensus through a process that mobilizes individuals and groups, often in an unprecedented way. **Comments:** No legislated policy. When SF's outdoor tobacco advertising ordinance was still being implemented, it covered events that took place on city streets and in city-owned stadiums, etc. Implementation/enforcement was halted with the Supreme Court's Massachusetts decision.	✓						
8.	**Active Enforcement** Refers to the amount of activity conducted to promote adherence to a policy. Activities may include conducting monitoring and surveillance, sting operations, responding to complaints, and the imposition of sanctions or penalties for non-compliance. A policy's strength is highly dependent on the consistency and quality of enforcement efforts. Some policies, such as no-tobacco-sales-to-minors laws, where non-compliance is not highly visible to the community, require greater official enforcement effort to create a deterrent effect; non-compliance with a highly visible policy such as no-smoking restrictions requires less enforcement effort. **Comments:** No policies to enforce.	✓						

CX Indicator Rating Worksheet Example (continued)

	Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4	Insufficient Data (ID)	Not Applicable (N/A)
9.	**Compliance** Refers to the level of observance of existing policies, either voluntary or legislated. Compliance is generally dependent on those impacted by the policy, such as citizens adhering to smoking restrictions on beaches or store clerks not selling tobacco to minors.	✓						
	Comments: No policies to be compliant with.							
	Overall Indicator Rating This score is NOT a mathematical average of the attributes' ratings. The group may feel that some attributes deserve greater weight than others.		✓					
	Comments: Little concentrated work has been done in this area. However, it is an area the coalition is interested in pursuing and will be part of the next three-year plan.							

CX Indicator Rating Worksheet Example (continued)

CX Indicator Rating Worksheet

Ethnic/Priority Populations: Overall, are there ethnic or other priority populations in this community that have specific needs regarding this indicator?

Yes __X__   No _____

If yes, identify the ethnic/priority groups and their needs: _____

_____

_____

Attached documents: Attach data source and assessment documents for documentation, planning, and evaluation purposes.
Please maintain these materials at your office and do not submit to the Tobacco Control Section.

DATA SOURCES	DATE
C-STATS Web site	2002
Dept. of Consumer Assurance	2002 – 2003
Tobacco Free Project Sponsorship Policy	2002

Person(s) or group(s) completing the worksheet and assessment:

1. Mele Lau Smith

2. Alma Avila

3. Susana Hennessey Lavery

OTIS Indicator Worksheet
Example

View Indicator Worksheet

Indicator: 2.2.13   Extent that multi-unit housing complexes (e.g., apartment owners, condo associations and public housing boards) adopt policies that protect residents from drifting secondhand smoke between units and incorporate enforcement/compliance remedies such as including secondhand smoke exposure in nuisance abatement statutes

Core Indicator: No

ASSESSMENT DATA

Community Assessed:	Unincorporated Community(s)	Incorporated City(s)
	None	None
	Countywide	**Indian Tribal Lands**
	Yolo	None
	Political District	
	No Data	

Time Period Assessed: From: July 1, 2001
To: December 31, 2003

Data Collection Timeframe: 2001, 2002, 2003

Indicator worksheet (continued)

RATING		EDIT
Indicator	**Rating**	**Comments**
Public awareness	Poor	The public is not aware of existing policies. However, the public is aware of health hazards of SHS. 91.3% (2002) of adults in Yolo County are aware that SHS exposure causes lung cancer and 96.8% are aware that SHS exposure harms babies and children.
Public support	Fair	General consensus supports smoke-free housing. 82.1% (2002) of adults report a complete smoking ban in the home in Yolo County; however, 37.7% (2004)of Yolo County youth report living with someone who smokes and 27.5% of Yolo County youth report exposure to SHS in the past 7 days at home compared to 24.6% of youth statewide
Media attention	None	No media attention about SHS exposure in multi-unit housing
Education/awareness campaign	None	Since this is not in the LLAs scope of work, there have been no attempts at education.
Media campaign	None	There has been no media released for this topic.
Voluntary policy	None	Some apartments have policies, but there's been no education.
Legislated policy	None	No policies exist.

Indicator worksheet (continued)

Active enforcement	Not Applicable
Compliance	Not Applicable
Overall indicator rating	None	There is a drastic need for improvement on this indicator due to the lack of policy and awareness of the problem of SHS exposure in multi-unit housing.

POPULATIONS   EDIT

Overall, are there ethnic or other special populations in this community that have specific needs regarding this indicator?   Yes

Ethnic Groups   Add

Group	Needs	Actions

Special Groups   Add

Group	Needs	Actions
Multi-unit housing with families	Education and policy protection	Edit	Delete

DATA SOURCE(S)   ADD

Data Source	Dates	Actions
2001/2004 LLA Comprehensive Tobacco Control Plan	2003	Edit	Delete
C-STATS Website	2002	Edit	Delete
2001/2004 LLA Comprehensive Tobacco Control Plan	2001,2002, 2003, 2004	Edit	Delete

COMPLETER(S)   ADD

Completer	Actions
Yolo County Coalition Members	Edit	Delete

OTIS Asset Worksheet
Example

View Community Assets Worksheet

Community Assessed:

Unincorporated Community(s)	Incorporated City(s)
Presidio (San Francisco)	San Francisco
Countywide	**Indian Tribal Lands**
San Francisco	None
Political District	
No Data	

Time Period Assessed: From: November 1, 2001

To: October 1, 2003

Data Collection Timeframe: 2003

ASSET RATING

Asset	Rating	Comments
Asset 1.1	Good	Approximately $1.5 million a year was allocated to tobacco control efforts between 2001-2004. Funds come from Prop 99 and MSA funds. The current per capita appropriation for 2003-2004 is approximately $2.00 – 1.5 million/800,000 residence.
Asset 1.2	Excellent	$1 million a year of MSA funds are allocated to tobacco control - 60% more than the Prop 99 funding allocation.
Asset 1.3	None	The Prop 10 plan does not address cessation or secondhand smoke education for pregnant women with young children.

Asset worksheet (continued)

Asset 2.1	Good	The Community Capacity Building projects the LLA funds have a strong tobacco control advocacy training component for both youth and advocates. The Youth Leadership Institute, a coalition member, has a strong youth advocacy component as well.
Asset 2.2	Good	The most recent coalition survey completed in Summer 2002 showed that coalition members perceive the coalition to be representative of SF residents as well as feel the work in driven by the coalition members rather than by staff.
Asset 2.3	Excellent	84% of SF the key opinion leaders surveyed in 2000 supported community wide changes around tobacco use as an effective means to reduce or prevent tobacco use. Since 2000 there was a change in the composition of the board of supervisors. In October 2003, 10 out of 11 members of the Board of Supervisors voted in favor of a strong tobacco permit ordinance.
Asset 2.4	Good	The youth who work with the coalition are part of the community capacity building projects funded through the LLA. All youth activists receive stipends.
Asset 2.5	Fair	A number of coalition members are not funded through Prop 99 or local MSA funds and do take part in coalition activities by writing letters, making phone calls etc.

Asset worksheet (continued)

Asset 2.6	Good	Several community based groups that have been funded as CCB projects represent groups who do not focus on tobacco as part of the mandate of their organization. These groups have linked tobacco to their priority issues such as food security, environmental justice, and housing issues for communities that have high rates of asthma among children. Other non-traditional partners have been participating in the global action task force of the coalition.
Asset 3.1	Good	The community capacity building projects that are members of the Coalition represent the diversity of San Francisco very well, with the exception of the API community.
Asset 3.2	Good	The LLA is committed to funding community based organizations that are representative of the community. This is reflected in the system we have set up to fund community based agencies through a fiscal sponsor allowing small community based agencies to be funded as subcontractors rather than a contractor which is often times an obstacle to receiving funds. These funded agencies have consistently represented cultural or ethnic minorities. A specific objective has been included in the workplan that indicates this. The TCS funded projects in the county are targeted at specific ethnic populations so all of their objectives are implied to address cultural or ethnic/minority communities. For the next 3-year plan, coalition input will be solicited as to how to incorporate such objectives.
Asset 3.3	Good	The LLA coalition's mission statement states that the comprehensive plan for SF must address the unique diversity of SF. All of the community based organizations promote culture diversity even though their mission statements may not say so in those exact

Asset worksheet (continued)

Asset 3.4	Good	Most of the materials that groups use are purchased through TECC for the specific population the organization serves.
Asset 3.5	Good	The staff and subcontractors have reflected the demographics of the SF population very well. Media contractors reflective of the diverse communities of SF have recently been recruited to provide media relations and graphic design support to funded projects. Seven cessation minigrants have been funded with MSA to address several priority populations (African American, Asian/PI, Latino, LGBT, Russian speaking immigrants.)

DATA SOURCE(S)

Asset	Data Source	Dates	Actions
Asset 2.2	LLA OTIS Coalition Report	2002	
Asset 2.3	ALAC Key Opinion Survey	2002	

COMPLETER(S)

Completer	Actions
Alexandra Hernandez, coalition co-chair	
Coalition	
mele lau smith	
Michelle Rivero, Coalition co-chair	

Section 5
Supplemental Materials

In this section, you will find the following tools:

- CX Indicator Rating Worksheet Instructions
- CX Indicator Rating Worksheet
- CX Indicator-Attribute Rating Guide
- CX Asset Rating Worksheet Instructions
- CX Asset Rating Worksheet
- CX Asset Rating Guide

CX Indicator Rating Worksheet Instructions

Indicator Number   Identify the community indicator number listed next to the description.

Core Indicator   Indicate "yes" or "no" as to whether the community indicator is core.

Indicator Title   Identify briefly the subject matter of the indicator.

Community Area Assessed   Identify the geographical community area being assessed for the indicator, such as the entire county, a city area, non-incorporated community, political district, or tribal land.

Date(s) Assessment Conducted   Identify the dates when your agency conducted the community assessment (e.g., conducted the research and rated the indicators).

Data Collection Timeframe   Identify the original year(s) of the data that were used in the indicator assessment (e.g., local youth purchase survey conducted in 2004 or local bar inspections conducted in 2005).

Rating Scale   Based on the review of various data sources and coalition discussions, rate each of the nine attributes ("public awareness" to "compliance") on a scale from None to Excellent. Your rating will reflect both a quantitative and qualitative assessment and may need to consider divergent data. For example, while there may be good public support for smoke-free bar enforcement, the support among law enforcement and elected officials may be poor. Use the CX Indicator-Attribute Rating Guide to help you with this portion of the assessment. It is important to recognize that qualitative data, such as observations, program history, and coalition experience are relevant data sources and should be used to help assign a score value.

  If sufficient data is not available to properly assign a score, mark the "I/D" (Insufficient Data) box. If a particular characteristic does not apply, check the "N/A" box (e.g., the quality of a "legislated policy" may not be applicable if the indicator refers to a "voluntary policy.")

Comments   Summarize and record major findings that justify and support the rating for each attribute. For example, describe if there is a state or local law in existence, survey results, educational efforts conducted by your organization or others, etc. It is important that the comments substantiate and/or explain the score given to each attribute. Also use this section to describe special population needs for ethnic or other priority population groups identified on the CX Indicator Rating Worksheet.

CX Indicator Rating Worksheet Instructions (continued)

Overall Indicator Rating	Based on your rating of the nine attributes, select the rating that best applies to the indicator. This process is not meant to reflect a stringent or mathematical average, but rather a summation of both quantitative and qualitative data sources derived from reviewing all the rating scores assigned to the indicators.
Ethnic/Priority Populations	Determine any potential ethnic or other priority population needs that are especially impacted or under-served by the indicator. Identify these groups and the types of strategies needed.
Attached Documents	Attach to each CX Indicator Rating Worksheet the documentation gathered and used during the assessment process. Maintain the documents together in your office to facilitate continued planning and evaluation activities. Do not submit these documents to TCS.
Data Sources	Identify the data sources and the dates of the data sources used to assess the indicator, such as local survey data, statewide demographic data, prevalence data, etc. Qualitative data sources, such as coalition discussions, individual resource experts, focus group findings, and key informant interviews are acceptable data sources. Be sure to record "consensus" comments from qualitative data sources in the Comment section of the form and clearly identify quantitative data sources in the list of data sources.
Name of Person(s) or Group	Identify the staff, coalition members, consultants, etc. involved in completing the CX Indicator Rating Worksheet and the overall indicator assessment. This will enable you to obtain clarification if questions arise in the future. You may list group titles, rather than individual names.

CX Indicator Rating Worksheet

Indicator Number: _____ Core Indicator? Yes _____ No _____

Indicator Title: _____

Community Area Assessed: _____

Date(s) Assessment Conducted: _____

Data Collection Timeframe: _____

Note: *Comments are required for each attribute and the overall rating.*

Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4	Insufficient Data (ID)	Not Applicable (N/A)
1. **Public Awareness** Refers to the level of general knowledge the community has about the issue. While some issues have a high level of common knowledge, such as the dangers of secondhand smoke, public awareness about other issues can vary greatly within a community based on cultural or educational factors. **Comments:**							

CX Indicator Rating Worksheet (continued)

	Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4	Insufficient Data (ID)	Not Applicable (N/A)
2.	**Public Support** Refers to the degree to which the community holds attitudes and beliefs that support efforts to address the issue (i.e., the amount of backing within a community for the issue). The degree of public support is a key element in determining a community's readiness to tackle a policy initiative. **Comments:**							
3.	**Media Attention** Refers to how much and how often an issue has been covered in the local or state press (e.g., newspapers, TV, radio, etc.). **Comments:**							
4.	**Education/Awareness Campaign** Refers to efforts in the community either by the agency conducting the needs assessment or by other projects serving the community that have conducted educational activities to increase awareness and knowledge about the issue. May include using presentations, outreach visits, training, Web sites, public relations events, or educational materials dissemination. **Comments:**							

CX Indicator Rating Worksheet (continued)

Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4	Insufficient Data (ID)	Not Applicable (N/A)
5. **Media Campaign** Refers to paid or public service announcement (PSA) advertising campaigns either funded by the agency conducting the needs assessment, other projects serving the community, or the state media campaign (e.g., ads placed on billboards, newspapers, magazines, TV, radio, transit, etc.). Does not include public relations activities. **Comments:**							
6. **Voluntary Policy** Refers to policies that are not mandated by law, but instead reflect action taken by businesses, housing complexes, venues, and other entities that address their business practices or property. Voluntary policies are often the precursor to establishing permanent community change, such as no-smoking apartment complex policies, but rely heavily on public pressure, and customer and employer cooperation to maintain compliance. **Comments:**							

CX Indicator Rating Worksheet (continued)

Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4	Insufficient Data (ID)	Not Applicable (N/A)
7. **Legislated Policy** Refers to policies passed into law by a government or board authorized to set formal rules, such as a city, county, state, tribe, fairboard, transit authority, or housing authority. Legislated policies create sustainable community change and build consensus through a process that mobilizes individuals and groups, often in an unprecedented way. **Comments:**							
8. **Active Enforcement** Refers to the amount of activity conducted to promote adherence to a policy. Activities may include conducting monitoring and surveillance, sting operations, responding to complaints, and the imposition of sanctions or penalties for non-compliance. A policy's strength is highly dependent on the consistency and quality of enforcement efforts. Some policies, such as no-tobacco-sales-to-minors laws, where non-compliance is not highly visible to the community, require greater official enforcement effort to create a deterrent effect; non-compliance with a highly visible policy such as no-smoking restrictions requires less enforcement effort. **Comments:**							

CX Indicator Rating Worksheet (continued)

Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4	Insufficient Data (ID)	Not Applicable (N/A)
9. **Compliance** Refers to the level of observance of existing policies, either voluntary or legislated. Compliance is generally dependent on those impacted by the policy, such as citizens adhering to smoking restrictions on beaches or store clerks not selling tobacco to minors. **Comments:**							
Overall Indicator Rating This score is NOT a mathematical average of the attributes' ratings. The group may feel that some attributes deserve greater weight than others. **Comments:**							

CX Indicator Rating Worksheet

Ethnic/Priority Populations: Overall, are there ethnic or other priority populations in this community that have specific needs regarding this indicator?

Yes _____   No _____

If yes, identify the ethnic/priority groups and their needs:_____

_____

_____

Attached documents: Attach data source and assessment documents for documentation, planning, and evaluation purposes.

Please maintain these materials at your office and do not submit to the Tobacco Control Section.

DATA SOURCES	DATE

Person(s) or group(s) completing the worksheet and assessment:

1.

2.

3.

4.

5.

CX Indicator Attribute Rating Guide

Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4
Public Awareness Refers to the level of general knowledge the community has about the issue. While some issues have a high level of common knowledge, such as the dangers of secondhand smoke, public awareness about other issues can vary greatly within a community based on cultural or educational factors.	General knowledge about the issue is virtually non-existent in the community.	There is minimal knowledge about the issue in the community.	There is a mixed level of knowledge about the issue in the community. Some members of the community have considerable knowledge while other sectors have limited or no knowledge.	There is generally wide spread knowledge about the issue in the community across cultures and geographic areas.	There is a high level of knowledge about the issue in the community across cultures and geographic areas; This knowledge has generated public expressions of concern by members of the community (e.g., letters to the editor, complaints received, public hearings).
Public Support Refers to the degree to which the community holds attitudes and beliefs that support efforts to address the issue (i.e., the amount of backing within a community for the issue). The degree of public support is a key element in determining a community's readiness to tackle a policy initiative.	There is no community support for addressing the issue. In fact strong opposition may have been expressed.	There is community apathy for addressing the issue. The issue is not valued as a priority within the community.	There is inconsistent support for addressing the issue across population groups and/ or geographic areas. Level of support reflects a mix of opposition, apathy, and support.	More than 50% agree that the issue is worth supporting and community readiness to act is considered good.	More than 75% agree that the issue is worth supporting. The community may have engaged in action around the issue.

CX Indicator Attribute Rating Guide (continued)

Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4
Media Attention Refers to how much and how often an issue has been covered in the local or state press (e.g., newspapers, TV, radio, etc.).	In the last three years there has been no news coverage in the local or state press about the issue.	In the last three years there has been minimal news coverage in the local or state press about the issue (e.g., less than one story annually).	In the past three years there has been limited news coverage in the local or state press about the issue (e.g., about one to two news stories per year).	In the past three years news coverage in the local or state press about the issue has been fairly consistent and contributed toward increased public awareness about the issue (e.g., two or more stories per year). Local media occasionally seeks information about the issue.	In the past three years news coverage in the local or state press about the issue has been "hot." The news media regularly sought information about the issue.
Education/Awareness Campaign Refers to efforts in the community either by the agency conducting the needs assessment or by other projects serving the community that have conducted educational activities to increase awareness and knowledge about the issue. May include using presentations, outreach visits, training, Web sites, public relations events, or educational materials dissemination.	In the past three years there was no educational outreach or awareness raising activities conducted in the community by any local or state organization regarding the issue.	In the past three years there was minimal educational outreach or awareness raising activities conducted in the community by any local or state organization regarding the issue.	In the past three years a moderate amount of educational outreach or awareness raising activities were conducted in the community by any local or state organization regarding the issue. Efforts may have been sporadic and/or reached limited target groups. Little tailoring to either demographic, cultural, or language needs of the community.	In the past three years there was a consistent educational outreach or awareness raising campaign conducted in the community by any local or state organization regarding the issue. Educational methods included tailoring to demographic, culture, and language needs of the community, but lacked variety in the methods used and/or were limited in geographic reach.	In the past three years a comprehensive strategic educational outreach and awareness campaign was conducted by local organizations regarding the issue. Educational methods were varied and addressed a variety of languages, cultures, and geographic areas.

CX Indicator Attribute Rating Guide (continued)

Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4
Media Campaign Refers to paid or public service announcement (PSA) advertising campaigns either funded by the agency conducting the needs assessment, other projects serving the community, or the state media campaign (e.g., ads placed on billboards, newspapers, magazines, TV, radio, transit, etc.). Does not include public relations activities.	In the past three years there was no airing in the community of paid or PSA advertising by local or state organizations regarding the issue.	In the past three years there was minimal airing in the community of paid or PSA advertising by local or state organizations regarding the issue.	In the past three years there was occasional airing in the community of paid or PSA advertising by local or state organizations regarding the issue. Advertising campaign was in one language only, limited in the audiences targeted, or limited in the geographic area in which the campaign aired.	In the past three years there was a paid or PSA advertising campaign in the community conducted by local or state organizations regarding the issue. The advertising campaign was conducted in more than one language (as appropriate to the demographics of the community), targeted multiple audiences, and aired in several geographic areas of the community.	In the past three years there was a comprehensive strategically placed paid or PSA advertising campaign conducted in the community by local or state organizations regarding the issue. The advertising campaign was conducted in multiple languages (as appropriate to the demographics of the community), targeted multiple audiences, and aired widely throughout the community.

CX Indicator Attribute Rating Guide (continued)

Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4
Voluntary Policy Refers to policies that are not mandated by law, but instead reflect action taken by businesses, housing complexes, venues, and other entities that address their business practices or property. Voluntary policies are often the precursor to establishing permanent community change, such as no-smoking apartment complex policies, but rely heavily on public pressure, and customer and employer cooperation to maintain compliance.	In the past three years there were no attempts to establish any voluntary policies addressing the issue.	In the past three years there was an unsuccessful attempt to establish one or more voluntary policies addressing the issue.	In the past three years one or more voluntary policies were adopted that addressed the issue. However the number of establishments impacted by the policy is small in comparison to the universe of possible establishments (e.g., apartment complexes, event venues, restaurants).	In the past three years one or more voluntary policies were adopted. The number of policies adopted covers at least 30% of the universe of establishments (e.g., apartment complexes, outdoor restaurants).	In the past three years one or more voluntary policies were adopted and the voluntary policies cover at least 50% of the universe of establishments (e.g., apartment complexes, outdoor restaurants).

CX Indicator Attribute Rating Guide (continued)

Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4
Legislated Policy Refers to policies passed into law by a government or board authorized to set formal rules, such as a city, county, state, tribe, fairboard, transit authority, or housing authority. Legislated policies create sustainable community change and build consensus through a process that mobilizes individuals and groups, often in an unprecedented way.	In the past three years there was no attempt to enact a local, tribal, state, or governmental board policy regarding the issue.	In the past three years there was an unsuccessful attempt to enact a local, tribal, state, or governmental board policy regarding the issue.	In the past three years a local, tribal, state, or governmental board policy was enacted regarding the issue. However, the policy is generally considered weak because enforcement provisions are not well defined and penalties are low or enforcement provisions may not be described or penalties are insufficient to create a deterrent effect. The proportion of jurisdictions in the community covered by the policy is less than 50%.	In the past three years one or more local, tribal, state, or governmental board policies were enacted regarding the issue. Policies describe enforcement provisions. Penalties are sufficient to create a deterrent effect. In general, the policy is consistent with minimum public health standards recommended by state or national organizations. Half to 75% of the jurisdictions in the community are covered by the policies.	In the past three years one or more local, tribal, state, or governmental board policies were enacted regarding the issue. Policies describe enforcement provisions. Penalties are sufficient to create a deterrent effect. In general, the policy is consistent with minimum public health standards recommended by state or national organizations. Three-quarters to 100% of the jurisdictions in the community are covered by the policies.

CX Indicator Attribute Rating Guide (continued)

Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4
Active Enforcement Refers to the amount of activity conducted to promote adherence to a policy. Activities may include conducting monitoring and surveillance, sting operations, responding to complaints, and the imposition of sanctions or penalties for non-compliance. A policy's strength is highly dependent on the consistency and quality of enforcement efforts. Some policies, such as no-tobacco-sales-to-minors laws, where non-compliance is not highly visible to the community, require more official enforcement effort to create a deterrent effect; highly visible non-compliance with policy, such as with no-smoking restrictions, requires less enforcement effort.	In the past three years there was no effort made to ensure adherence to any policy regarding the issue. Possibly no enforcement agency even identified.	In the past three years, limited efforts were made to ensure adequate enforcement of policies regarding the issue. Enforcement attempt may have been limited to a few occurrences that had little to no impact on sustained compliance. Sanctions assessed for non-compliance were weak (e.g., warnings only).	In the past three years enforcement of policies regarding the issue were sporadic. They may have been generated in response to public complaints only or there was no consistent effort to maintain an enforcement presence. Meaningful sanctions for non-compliance are rare.	In the past three years enforcement of policies regarding the issue occurred regularly. Meaningful sanctions for non-compliance occur on a regular basis as needed. However, there may be a few areas of the community where enforcement is not occurring regularly with meaningful sanctions.	In the past three years enforcement of policies regarding the issue occurred regularly. Meaningful sanctions for non-compliance occur on a regular basis. Enforcement activity at this level is widespread throughout the community.

CX Indicator Attribute Rating Guide (continued)

Attribute	None 0	Poor 1	Fair 2	Good 3	Excellent 4
Compliance Refers to the level of observance of existing policies, either voluntary or legislated. Compliance is generally dependent on those impacted by the policy, such as citizens adhering to smoking restrictions on beaches or store clerks not selling tobacco to minors.	In the past three years non-adherence to the policy is widespread and pervasive throughout the community as demonstrated by low compliance rates documented during observational surveys, numerous complaints received, or open flaunting of the law.	In the past three years non-adherence to the policy is common as documented by compliance rates of 50% or less overall, or frequent complaints of non-compliance, or there is general knowledge in the community that non-compliance is common in certain areas of the community either geographically or with specific business types (e.g., stand alone bars, donut shops, etc.).	In the past three years adherence to the policy has been inconsistent. Compliance rates are less than 75% overall, or are not consistently sustained at 75% over time, across geographical areas, and with all specific business types (e.g., stand alone bars, donut shops, etc.).	In the past three years adherence to the policy has been sustained with compliance rates at 75% overall, or higher overall although a few geographical areas or business types (e.g., stand alone bars, donut shops) may have rates that are lower than the overall compliance rate.	In the past three years adherence to the policy has been sustained with compliance rates sustained at 90% or higher overall with good compliance throughout the community both geographically and by business type (e.g., stand alone bars, donut shops, etc.).

CX Asset Rating Worksheet Instructions

Community Area Assessed	Identify the geographical community area being assessed for the indicator, such as the entire county, a city area, non-incorporated community, political district, or tribal land.
Date(s) Assessment Conducted	Identify the dates when your agency conducted the community assessment, e.g., conducted the research and rated the assets.
Data Timeframe	Identify the month and year for the data (e.g., Coalition Survey, January 2006).
Community Asset Rating	Rate each Community Asset on a scale from 0 to 4 (None to Excellent). If sufficient data is not available to properly assign a score, mark the "D/K" (Don't Know) box.
Comments	Record information that justifies and supports the rating.
Attached Documents	Attach the documentation gathered and used during the assessment process. Maintain the documents together in your office to facilitate continued planning and evaluation activities. Do not submit these documents to TCS.
Data Sources	Identify the data sources and original year(s) of the data that were used to assess the asset, such as a local coalition satisfaction survey in 2005.
Name of Person(s) or Group	Identify the staff, coalition members, consultants, etc. involved in completing the CX Indicator Rating Worksheet and the overall indicator assessment. This will enable you to obtain clarification if questions arise in the future. You may list group titles, rather than individual names.

CX Asset Rating Worksheet

Community Area Assessed: _____

Date(s) Assessment Conducted: _____

Data Collection Timeframe: _____

	Community Asset	None	Poor	Fair	Good	Excellent	Don't Know
1.1	Global per capita appropriation for tobacco control activities, from various sources, is consistent with the recommendations of the National Association of County and City Health Officials (NACCHO): • < 100,000 population: $8 to $10/capita • 101,000-500,000 population: $6 to $8/capita • > 501,000 population: $4 to $6/capita • Subset of global per capita funding for school programs: $4 to $6 per student regardless of student population size. **Comments:**	0	1	2	3	4	DK
1.2	Amount of MSA funds that are appropriated for the purpose of tobacco control activities **Comments:**	0	1	2	3	4	DK
1.3	Amount of local Prop 10 funds that are appropriated for cessation and secondhand smoke education targeting pregnant women and families with young children **Comments:**	0	1	2	3	4	DK
2.1	Number of tobacco control advocacy trainings that are provided to youth and adults **Comments:**	0	1	2	3	4	DK

2.2   Amount of satisfaction among coalition or   0   1   2   3   4   DK
      advisory committee members with program
      planning, involvement of the community,
      implementation activities, quality of services
      and progress made by the project
      Comments:

2.3   Amount of support by local key opinion   0   1   2   3   4   DK
      leaders for tobacco related community
      norm change strategies
      Comments:

2.4   Amount of community activism among   0   1   2   3   4   DK
      youth to support tobacco control efforts
      Comments:

2.5   Amount of community activism among   0   1   2   3   4   DK
      adults to support tobacco control efforts
      Comments:

2.6   Number and type of non-traditional   0   1   2   3   4   DK
      partners participating in coalitions or
      advisory committees facilitating tobacco
      control efforts
      Comments:

3.1   Number and diversity (i.e., ethnic, cultural, 0   1   2   3   4   DK
      sexual orientation) of partners participating
      in coalition or advisory committee is relative
      to their proportion in the community
      Comments:

		0	1	2	3	4	DK
3.3	Extent that the coalition or advisory committee by-laws and member agency mission statements promote cultural diversity and competency **Comments:**	0	1	2	3	4	DK
3.4	Extent that educational and media materials used by the agency reflect the cultural, ethnic, sexual orientation, and languages of the communities served, relative to the demographics of the community **Comments:**	0	1	2	3	4	DK
3.6	Extent to which culturally and ethnically diverse organizations are funded to implement community norm change-focused tobacco control efforts in the community, in proportion to the demographics of the community **Comments:**	0	1	2	3	4	DK
3.7	Extent to which a tobacco control program implements organizational policies and practices that promote and institutionalize the provision of culturally competent and linguistically appropriate services for diverse populations, including organizational values that articulate commitment to cultural competency, participatory collaborative planning, provision of community capacity building, translation policies, staff diversity, and formative research/surveillance within diverse communities **Comments:**	0	1	2	3	4	DK

CX Asset Rating Worksheet (continued)

Attached documents: Attach data sources and assessment documents for documentation, planning, and evaluation purposes. Please maintain these materials at your office and do not submit to the Tobacco Control Section. (You may record your data sources here and/or on the CX Asset Data Record.)

DATA SOURCES	DATE

Person(s) or group(s) completing the worksheet and assessment:

1.

2.

3.

4.

5.

CX Asset Rating Guide

Tobacco Control Funding Assets

Community Asset	None 0	Poor 1	Fair 2	Good 3	Excellent 4
1.1 Global per capita appropriation for tobacco control activities, from various sources, is consistent with the recommendations of the National Association of County and City Health Officials (NACCHO): • <100,000 population: $8–$10/capita • 101,000–500,000 population: $6–$8/capita • >501,000 population: $4–$6/capita Subset of global per capita funding for school programs: • $4 to $6 per student regardless of student population size.	No local funding, including Prop 99, appropriated for tobacco control activities.	Per capita appropriation for tobacco control to the health department, school programs, and enforcement activities from various sources (e.g., Prop 99, Prop 10, MSA, Mangini, local funds) is < 50% of the lower estimate recommended by NACCHO for the population and < 50% of the lower estimate recommended for the student population.	Per capita appropriation for tobacco control to the health department, school programs, and enforcement activities from various sources (e.g., Prop 99, Prop 10, MSA, Mangini, local funds) is at least 50% of the lower estimate recommended by NACCHO for the population, and student per capita funding is at least 50% of the lower estimate recommended by NACCHO for the student population.	Per capita appropriation for tobacco control to the health department, school programs, and enforcement activities from various sources (e.g., Prop 99, Prop 10, MSA, Mangini, local funds) is within the range recommended by NACCHO for the population, and student per capita funding is within the range recommended by NACCHO for the student population.	Per capita appropriation for tobacco control to the health department, school programs, and enforcement activities from various sources (e.g., Prop 99, Prop 10, MSA, Mangini, local funds) is greater than the top range recommended by NACCHO for the population, and student per capita funding is above the top range recommended by NACCHO for the student population.

CX Asset Rating Guide (continued)

Community Asset	None 0	Poor 1	Fair 2	Good 3	Excellent 4
1.2 Amount of MSA funds that are appropriated for the purpose of tobacco control activities	No city or county MSA funds are appropriated for the purpose of tobacco control activities.	Annual MSA appropriation is less than 50% of the health department's annual Prop 99 Health Education Account (HEA) allocation.	Annual MSA appropriation is at least 50% of the health department's annual Prop 99 HEA Account allocation.	Annual MSA appropriation is greater than 50%, but less than 100%, of the health department's annual Prop 99 HEA allocation.	Annual MSA appropriation is equal to or greater than the health department's annual Prop 99 HEA allocation.
1.3 Amount of local Prop 10 funds that are appropriated for cessation and secondhand smoke education targeting pregnant women and families with young children	The local Prop 10 Commission Plan does not address cessation and secondhand smoke education targeting pregnant women and families with young children.	The local Prop 10 Commission Plan includes goals and objectives addressing cessation and secondhand smoke education targeting pregnant women and families with young children but no specific programs or activities are identified.	The local Prop 10 Commission Plan includes goals and objectives addressing cessation and secondhand smoke education targeting pregnant women and families with young children. Less than 1% of the health jurisdiction's Prop 10 allocation is for these activities.	The local Prop 10 Commission Plan includes goals and objectives addressing cessation and secondhand smoke education targeting pregnant women and young children and appropriates 1% of the health jurisdiction's Prop 10 allocation for these activities.	The local Prop 10 Commission Plan includes goals and objectives addressing cessation and secondhand smoke education targeting pregnant women and young children and appropriates more than 1% of the health jurisdiction's Prop 10 allocation for these activities.

CX Asset Rating Guide (continued)

Community Asset	None 0	Poor 1	Fair 2	Good 3	Excellent 4
Social Capital Assets					
2.1 Number of tobacco control advocacy trainings that are provided to youth and adults	No tobacco control advocacy training was provided to youth or adults in the past 12 months within the health jurisdiction.	One tobacco control advocacy training was provided for either youth or adults in the past 12 months within the health jurisdiction.	At least one tobacco control advocacy training was provided each for adults and youth in the past 12 months within the health jurisdiction.	At least two tobacco control advocacy trainings were provided each for adults and youth in the past 12 months within the health jurisdiction.	Three or more tobacco control advocacy trainings were provided each for adults and youth in the past 12 months within the health jurisdiction.
2.2 Amount of satisfaction among coalition or advisory committee members with program planning, involvement of the community, implementation activities, quality of services, and progress made by the project	On the most recent coalition or advisory committee satisfaction survey, no to very low satisfaction was expressed by members on three or more of the following measures: program planning, involvement of the community, implementation of activities, quality of services, or progress made.	On the most recent coalition or advisory committee satisfaction survey, members expressed fairly low satisfaction on two of the following measures, but others were rated somewhat satisfied to very satisfied. The measures are program planning, involvement of the community, implementation of activities, quality of services, and progress made.	On the most recent coalition or advisory committee satisfaction survey, members expressed they were somewhat satisfied with regard to program planning, involvement of the community, implementation of activities, quality of services, and progress made.	On the most recent coalition or advisory committee satisfaction survey, members expressed satisfaction with regard to program planning, involvement of the community, implementation of activities, quality of services, and progress made.	On the most recent coalition or advisory committee satisfaction survey, members expressed high to very high satisfaction with regard to program planning, involvement of the community, implementation of activities, quality of services, and progress made.

Community Asset	None 0	Poor 1	Fair 2	Good 3	Excellent 4
2.3 Amount of support by local key opinion leaders for tobacco related community norm change strategies	No support for tobacco-related community norm change strategies among local key opinion leaders as evidenced by surveys, key informant interviews, policy votes, statements in the media, etc. Statements are made by policy makers to not accept Prop 99 funding. There's opposition to placing tobacco control experts on the Prop 10 commission. No support for use of MSA funds for tobacco control.	Minimal support for tobacco-related community norm change strategies among local key opinion leaders as evidenced by surveys, key informant interviews, policy votes, statements in the media, etc. Support is generally tied to youth-only initiatives. Little support for tobacco control experts on the Prop 10 commission. Little support for use of MSA funds for tobacco control.	Some support for tobacco-related community norm change strategies among local key opinion leaders as evidenced by surveys, key informant interviews, policy votes, statements in the media, etc. Support is generally tied to youth-only initiatives. Some support for tobacco control experts on the Prop 10 commission. Some support for use of MSA funds for tobacco control.	Consistent support for tobacco-related community norm change strategies among local key opinion leaders as evidenced by surveys, key informant interviews, policy votes, statements in the media, etc. There is support for initiatives that go beyond youth focus. Strong support for tobacco control experts on the Prop 10 commission. Some support for use of MSA funds for tobacco control.	Consistent and progressive support for tobacco-related community norm change strategies among local key opinion leaders as evidenced by surveys, key informant interviews, policy votes, statements in the media, etc. Local key opinion leaders initiate community norm change strategies. Strong support for tobacco control experts on the Prop 10 commission. Strong and active support for use of MSA funds for tobacco control.

CX Asset Rating Guide (continued)

Community Asset	None 0	Poor 1	Fair 2	Good 3	Excellent 4
2.4 Amount of community activism among youth to support tobacco control efforts	Non-paid youth never to rarely participate in activities, such as serving as media spokespersons, testifying at public hearings, writing letters, collecting local data, and participating at media events.	Non-paid youth occasionally participate in activities, such as serving as media spokespersons, testifying at public hearings, writing letters, collecting local data, and participating at media events.	Non-paid youth participate in activities, such as serving as media spokespersons, testifying at public hearings, writing letters, collecting local data, and participating at media events, but only with constant urging.	Non-paid youth regularly participate in activities, such as serving as media spokespersons, testifying at public hearings, writing letters, collecting local data, and participating at media events, with minimal urging.	Non-paid youth regularly participate in and organize activities, such as serving as media spokespersons, testifying at public hearings, writing letters, collecting local data, and participating at media events.
2.5 Amount of community activism among adults to support tobacco control efforts	Non-Prop 99 funded adults never or rarely participate in activities, such as serving as media spokespersons, testifying at public hearings, writing letters, collecting local data, and participating at media events.	Non-Prop 99 funded adults occasionally participate in activities, such as serving as media spokespersons, testifying at public hearings, writing letters, collecting local data, and participating at media events.	Non-Prop 99 funded adults participate in activities, such as serving as media spokespersons, testifying at public hearings, writing letters, collecting local data, and participating at media events, but only with constant urging.	Non-Prop 99 funded adults regularly participate in activities, such as serving as media spokespersons, testifying at public hearings, writing letters, collecting local data, and participating at media events, with minimal urging.	Non-Prop 99 adults regularly participate in and organize activities, such as serving as media spokespersons, testifying at public hearings, writing letters, collecting local data, and participating at media events.

Community Asset	None 0	Poor 1	Fair 2	Good 3	Excellent 4
2.6 Number and type of non-traditional partners participating in coalitions or advisory committees facilitating tobacco control efforts	Individuals with personal interest or people representing community organizations that differ from traditional health, education, and social service agencies do not or rarely participate in the coalition or advisory committee.	The coalition or advisory committee is dominated by participation from health, education, and social service organizations. Non-traditional partners, such as law enforcement, media, business, housing authorities, child development, or private citizens participate largely by attending meetings and share information only.	Non-traditional partners, such as law enforcement, media, business, housing authorities, child development, or private citizens are listed on the coalition or advisory committee membership, attend meetings, share information, and occasionally participate in collaborative activities.	Non-traditional partners, such as law enforcement, media, business, housing authorities, child development, or private citizens are listed on the coalition or advisory committee membership, attend meetings, share information, and regularly participate in collaborative activities.	Non-traditional partners, such as law enforcement, media, business, housing authorities, child development, or private citizens are listed on the coalition membership, attend meetings, share information, and frequently participate in collaborative activities, even those that don't directly benefit their group.

CX Asset Rating Guide (continued)

Cultural Diversity and Cultural Competency Assets

Community Asset	None 0	Poor 1	Fair 2	Good 3	Excellent 4
3.1 Number and diversity (i.e, ethnic, cultural, sexual orientation) of partners participating in coalition or advisory committee is relative to their proportion in the community	No participation by ethnically/culturally diverse groups on the coalition or advisory committee.	Little participation by ethnically/culturally diverse groups on the coalition or advisory committee and no ethnic/cultural diversity represented among the executive committee or core leadership of the coalition or advisory committee.	Some participation by ethnically/culturally diverse groups on the coalition or advisory committee; one or two groups may be under-represented in relation to their proportion in the community and/or these groups are under-represented among the executive committee or core leadership of the coalition or advisory committee.	Participation by ethnically/culturally diverse groups on the coalition or advisory committee in general is proportionate to the community, but these groups may be under-represented among the executive committee or core leadership of the coalition or advisory committee.	Participation by ethnically/culturally diverse groups on the coalition or advisory committee in general is proportionate to the community and these groups are well represented among the executive committee or core leadership of the coalition or advisory committee.

CX Asset Rating Guide (continued)

	Community Asset	None 0	Poor 1	Fair 2	Good 3	Excellent 4
3.3	Extent that the coalition or advisory committee by-laws and member agency mission statements promote cultural diversity and competency	Coalition or advisory committee by-laws and member agency mission statements do not promote cultural diversity and competence.	Coalition or advisory committee by-laws include statements that promote cultural diversity and competence. Member agencies do not include statements in their agency mission statements.	Coalition or advisory committee by-laws and some (3 or fewer) member agency mission statements include specific statements to promote cultural diversity and competence.	Coalition or advisory committee by-laws and some (4 or more) member agency mission statements include specific statements to promote cultural diversity and competence.	Coalition or advisory committee by-laws and all member agency mission statements include specific statements to promote cultural diversity and competence.
3.4	Extent that educational and media materials used by the agency reflect the cultural, ethnic, sexual orientation, and languages of the communities served, relative to the demographics of the community	Educational and media materials used by the agency do not reflect the major cultural, ethnic, or language needs of the communities served, relative to the demographics of the community	Educational and media materials used by the agency reflect a few of the major cultural, ethnic, or language needs of the communities served, relative to the demographics of the community, but there are major gaps in terms of the populations and/or breadth of subject matter.	Educational and media materials used by the agency reflect several of the major cultural, ethnic, or language needs of the communities served, relative to the demographics of the community, but there are gaps in terms of the populations and/or breadth of subject matter.	Educational and media materials used by the agency reflect all the major cultural, ethnic, or language needs of the communities served relative to the demographics of the community, but there are some gaps in terms of the breadth of subject matter.	Educational and media materials used by the agency reflect all the major cultural, ethnic, or language needs of the communities served relative to the demographics of the community. No gaps in terms of the populations, languages, or breadth of subject matter were identified.

CX Asset Rating Guide (continued)

Community Asset	None 0	Poor 1	Fair 2	Good 3	Excellent 4
3.6 Extent to which culturally and ethnically diverse organizations are funded to implement community norm change focused tobacco control efforts in the community, in proportion to the demographics of the community	No culturally and ethnically diverse organizations are funded to implement community norm focused tobacco control efforts in the community.	No culturally and ethnically diverse organizations, in proportion to the demographics of the community, are funded to implement community norm focused tobacco control efforts in the community. However, at least one mainstream organizations such as the local health department or a voluntary health organization is funding a specific community norm focused tobacco control effort within a culturally or ethnical diverse community.	One or two culturally or ethnically diverse organizations, in proportion to the demographics of the community, are funded to implement community norm focused tobacco control efforts.	Several culturally or ethnically diverse organizations, in proportion to the demographics of the community, are funded to implement community norm focused tobacco control efforts.	Many culturally or ethnically diverse organizations, in proportion to the demographics of the community, are funded to implement community norm focused tobacco control efforts.

Community Asset	None 0	Poor 1	Fair 2	Good 3	Excellent 4
3.7 Extent to which a tobacco control program implements organizational policies and practices that promote and institutionalize the provision of culturally competent and linguistically appropriate services for diverse populations, including organizational values that articulate commitment to cultural competency, participatory collaborative planning, provision of community capacity building, translation policies, staff diversity, and formative research/surveillance within diverse communities	Tobacco control program does not have written organizational policies and practices that promote and institutionalize culturally competent and linguistically appropriate services. Planning activities do not engage culturally or linguistically diverse participants and/or are advisory in nature only. No capacity building efforts undertaken by the agency to improve the ability of culturally and linguistically diverse groups to be involved in tobacco control efforts. No formative research or surveillance conducted to better serve culturally and linguistically diverse groups in the community. Work force has little capacity to work with culturally and/or linguistically diverse community groups.	Tobacco control program does not have written organizational policies that promote and institutionalize culturally competent and linguistically appropriate services. Planning activities rarely engage culturally or linguistically diverse participants and/or are advisory in nature only. The tobacco control program rarely engages in efforts to build the capacity of culturally and linguistically diverse groups to be involved in tobacco control efforts. The tobacco control program rarely engages in formative research or surveillance to better serve culturally and linguistically diverse groups in the community. Work force has little capacity to work with culturally and/or linguistically diverse community groups.	Tobacco control program has written organizational policies that promote and institutionalize culturally competent and linguistically appropriate services. It occasionally engages in participatory collaborative planning with culturally and linguistically diverse communities; makes some effort to build the capacity of culturally and linguistically diverse communities to be involved in tobacco control efforts; makes minimal effort to engage in formative research or surveillance to better serve culturally and linguistically diverse group needs in the community. Work force is capable of working with a few diverse culture and language needs of the community.	Tobacco control program has written organizational policies that promote and institutionalize culturally competent and linguistically appropriate services. Frequently engages in participatory collaborative planning with culturally and linguistically diverse communities; proactively seeks to build the capacity of culturally and linguistically diverse communities to be involved in tobacco control efforts; engages in some formative research or surveillance to better serve culturally and linguistically diverse group needs in the community. Work force is competent in working with some diverse culture and language needs of the community.	Tobacco control program has written organizational policies that promote and institutionalize culturally competent and linguistically appropriate services and that are easily accessible and highlighted with community partners. It is highly successful in participatory collaborative planning activities with culturally and linguistically diverse communities; has documented results in building the capacity of culturally and linguistically diverse communities to be involved in tobacco control efforts; engages in formative research or surveillance to better serve culturally and linguistically diverse group needs in the community. Work force is competent in working with diverse cultures and language needs of the community.

Section 6: Completing the Tobacco Control Plan – Finalizing Your Travel Itinerary

Key Points:
- Completing the tobacco control plan is analogous to finalizing a travel itinerary.
- After rating the community indicators and community assets, an agency has sufficient information to prioritize tobacco control needs in its local community.
- High priority indicators and assets are analyzed for their potential as the basis of tobacco control objectives.
- Well-written objectives drive the rest of the tobacco control plan.

In this module, you have learned about the role of a needs assessment (pre-trip research) in the development of a tobacco control plan (travel itinerary), how to conduct research about tobacco control indicators and assets, and how to rate indicators and assets in order to assess the tobacco control needs in your community. This final section presents a preview of what comes next: developing objectives (specific destinations) and completing your tobacco control plan (which are covered in Module 4) .

Prioritizing the Indicators and Assets
Your pre-trip research revealed several intriguing destinations that your coalition or advisory committee determined are important issues to address. However, the reality of the situation is that there are budget, people resources, community readiness, and time limitations that impact how much your agency can possibly undertake. As a result, the group must prioritize and determine which indicators or assets will be developed into objectives for the tobacco control plan. Questions to consider when prioritizing indicators and assets

include the following:
- Is there room to make meaningful improvement on the issue?
- Are people in the community interested in the issue?
- Does the coalition or advisory committee have some ideas for actions that can be taken?
- Does the coalition or advisory committee have the resources needed to work on the issue? If not, can the resources be acquired?
- Does the coalition or advisory committee have reason to believe it can be successful on this issue?

Priorities Drive the Development of Objectives
As a result of prioritizing, some of the indicators and assets should begin to stand out from the rest because they represent problems or issues that are both compelling and not too daunting to tackle. Those are the indicators and assets that will form the basis of the next aspect of writing a tobacco control plan: fashioning the objectives.

In the CX framework, the needs assessment identifies the starting point, and the objective defines a measurable goal or end point that is to be reached during a certain period of time through a program's activities. In other words, the objectives drive the tobacco control plan in terms of the programmatic and media activities to be undertaken, as well as the evaluation to be conducted. The objectives communicate how the community will be different as a result of the program's efforts. A well-written objective communicates to others where the community is now and how community members will recognize that a benefit or change has occurred.

The number of objectives in a tobacco control plan depends on CDHS/TCS procurement requirements, the complexity of the issues, the community's readiness, the human resources available to implement the activities, and the budget.

CDHS/TCS looks for objectives in a local tobacco control plan that

- Strive to achieve a community norm change that represents an intermediate-level outcome such as adoption of a policy, reduced illegal tobacco sales, compliance with a law, elimination of tobacco company sponsorship, or establishment of smoke-free multi-unit housing.

- Seek to achieve a realistic yet meaningful public health gain.

- Avoid stating outcomes representing individual level change.

- Avoid stating outcomes where the achievement is the accomplishment of an activity.

- Avoid stating outcomes that reflect accomplishment of long-term outcomes, such as decreased tobacco prevalence or consumption, which are very difficult for a local community to track and attribute changes to its project's activities.

Consult Module 4 for additional help with priority setting and developing the tobacco control plan.